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| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7                     |
|   | Chapter 11 Chapter 12         |
|   | Chapter 13                    |

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself  |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  | Jerry                      |   |
|    | Write the name that is on   | First name                 | First name                                    |
|    | your government-issued<br>picture identification (for<br>example, your driver's | Middle name                | Middle name                                   |
|    | license or passport   | Last name                  | Last name                                     |
|    | Bring your picture identification to your meeting with the trustee.             | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last<br>8 years  | First name                 | First name                                    |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social   | XXX - XX- 9873             | xxx - xx-                                     |
|    | Security number or federal Individual   | OR                         | OR  |
|    | Taxpayer Identification number (ITIN)   | 9 xx - xx-                 | 9 xx - xx-                                    |

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| De | ebtor 1 Jerry<br>First Name                            | Hill Middle Name Last Name  | Case number (if known)   |
|----|--|---|--|
|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name   | Business name  |
|    | 8 years  | Business name   | Business name  |
|    | Include trade names and doing business as names        | EIN   | EIN  |
|    |  | EIN   | EIN  |
| 5. | Where you live   | 55.45.0 Thurs 20.51.0   | If Debtor 2 lives at a different address:  |
|    |  | 5545 S Throop St FI 2<br>Number Street  | Number Street  |
|    |  | Chicago Illinois 60636 City State Zip Code  | City State Zip Code  |
|    |  | Cook  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number Street   | Number Street  |
|    |  | City State Zip Code   | City State Zip Code  |
| 6  | Why you are  | City State Zip Code   | City State Zip Code  |
| 0. | choosing this district                                 | Check one:  | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                               |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |

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| De  | ebtor 1 Jerry   | Hill Case number (if known)  |
|-----|---|--|
|     | First Name  | Middle Name Last Name  |
| Pa  | rt 2: Tell the Court Abo  | it Your Bankruptcy Case  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13  |
| 8.  | How you will pay the fee  | <ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>✓ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>✓ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>   |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | ✓ No.           Yes. District         When MM / DD / YYYY         Case number MM / DD / YYYY           District         When MM / DD / YYYY         Case number MM / DD / YYYY           District         When MM / DD / YYYYY         Case number MM / DD / YYYYY   |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.     Yes. Debtor Relationship to you   District When   Debtor Case number, if known   Relationship to you    Relationship to you  Case number, if known  MM / DD / YYYY  Case number, if known  MM / DD / YYYYY  Case number, i |
| 11. | Do you rent your residence?   | <ul> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?</li> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>  |

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Hill Debtor 1 Jerry \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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| Pa  | rt 5: Explain Your Effor  | rts to Receive a Brie   | fing About Credit Counseling   |    |   |  |  |
|-----|---|---|--|----|---|--|--|
|     |   | About Debtor 1:   |  | Al | bout Debtor 2 (Sp   | oouse Only in a Joint Case):   |  |
| 15. | Tell the court  | You must check one:   |  | Yo | ou must check one:  |  |  |
|     | whether you have received briefing about credit counseling.   | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.   |    | counseling ager   | ing from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.  |  |
|     | The law requires that you receive a briefing  |   | he certificate and the payment plan, veloped with the agency.  |    |   | he certificate and the payment plan, veloped with the agency.  |  |
|     | about credit<br>counseling before you<br>file for bankruptcy.<br>You must truthfully                      | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |    | counseling ager   | ring from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |  |
|     | check one of the<br>following choices. If<br>you cannot do so, you<br>are not eligible to file.           |   | er you file this bankruptcy petition, opy of the certificate and payment   |    |   | er you file this bankruptcy petition, opy of the certificate and payment   |  |
|     | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques   | ked for credit counseling services<br>d agency, but was unable to<br>vices during the 7 days after I<br>t, and exigent circumstances<br>emporary waiver of the                   |    | from an approve<br>obtain those ser<br>made my reques   | ked for credit counseling services<br>ed agency, but was unable to<br>vices during the 7 days after I<br>st, and exigent circumstances<br>emporary waiver of the                 |  |
|     | creditors can begin<br>collection activities<br>again.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. |  |    | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. |  |  |
|     |   |   |  |    |   |  |  |
|     |   | receive a briefing<br>must file a certifica<br>with a copy of the   | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |    | receive a briefing<br>must file a certification<br>with a copy of the   | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |  |
|     |   |   | ne 30-day deadline is granted only mited to a maximum of 15 days.  |    |   | he 30-day deadline is granted only mited to a maximum of 15 days.  |  |
|     |   | I am not required counseling beca   | d to receive a briefing about credit use of:   |    | I am not required counseling beca   | d to receive a briefing about credit ause of:  |  |
|     |   | ☐ Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |    | Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |  |
|     |   | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.     |    | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.     |  |
|     |   | Active duty.  | I am currently on active military duty in a military combat zone.  |    | Active duty.  | I am currently on active military duty in a military combat zone.  |  |
|     |   | about credit coun   | are not required to receive a briefing seling, you must file a motion for punseling with the court.  |    | about credit cour   | are not required to receive a briefing seling, you must file a motion for ounseling with the court.  |  |

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Hill Debtor 1 Jerry Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Jerry Hill Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 5/1/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Jerry                                   |                            | Hill                  | Case number (if k            | nown)  |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                              |  |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. § 3 | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the i | nformation in the schedu     | les filed with the petition is incorrect.  |
| attorney, you do not                             | 4.5                        |                       |                              |  |
| need to file this page.                          | /s/ Jason Diaz             |                       | Date                         | 5/1/2017   |
|  | Signature of Attorney for  | or Debtor             | ——— MI                       | M / DD / YYYY  |
|  |                            |                       |                              |  |
|  |                            |                       |                              |  |
|  | Jason Diaz                 |                       |                              |  |
|  | Printed name               |                       |                              |  |
|  | Semrad Law Firm            |                       |                              |  |
|  | Firm name                  |                       |                              |  |
|  | 11101 S. Western Ave       | nue                   |                              |  |
|  | Street                     |                       |                              |  |
|  |                            |                       |                              |  |
|  | -                          |                       |                              |  |
|  | Chicago                    |                       | Illinois                     | 60643  |
|  | City                       |                       | State                        | Zip Code   |
|  |                            |                       |                              |  |
|  | Contact phone              | 3129130625            | Email address                | jdiaz@semradlaw.com  |
|  |                            |                       |                              | ·  |
|  |                            |                       | Illinois                     |  |
|  | Bar number                 |                       | State                        |  |

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| Fill in this information to identify your case: |                           |             |                      |  |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1  | Jerry                     |             | Hill                 |  |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |  |
|   |                           |             | (State)              |  |  |  |  |
| Case number<br>(If known)                       |                           |             |                      |  |  |  |  |

| Check if this is an |
|---------------------|
| <br>amended filing  |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | <b>Your assets</b><br>Value of what you own        |
|--|--|
| . Schedule A/B: Property (Official Form 106A/B)  | \$0.00   |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | <del>Ψ</del> 0.00                                  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$11,453.00  |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$11,453.00  |
| art 2: Summarize Your Liabilities  |  |
|  | Your liabilities<br>Amount you owe                 |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                   | \$19,513.00  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | <del>, ,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </del> |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$8,789.00   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$19,552.00  |
| Your total liabilities   | \$47,854.00  |
|  |  |
| Part 3: Summarize Your Income and Expenses   |  |
| art 3: Summarize Your Income and Expenses  . Schedule I: Your Income (Official Form 106I)                          | 40.7//   |
| •  | \$2,744.00   |

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Hill Debtor 1 Jerry \_ Case number (if known) Middle Name Last Name First Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$977.33 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$8,020.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$8,020.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | information to identify your c   | ase:  |  |   |  |  |
|--|--|---|--|---|--|--|
| Debtor 1                               | Jerry  |   | Hill   |   |  |  |
|  | First Name   | Middle Na   | me Last Na   | me  |  |  |
| Debtor 2<br>(Spouse, if fi             | ling) First Name   | Middle Na   | me Last Na   | me  |  |  |
| United Sta                             | ates Bankruptcy Court for the:   | Northern  | District of Illin  |   |  |  |
| Case num                               | nber   |   | (St  | ate)  |  |  |
| Officia                                | al Form 106A/B   |   |  |   |  | Check if this is an amended filing   |
| Sche                                   | dule A/B: Prope  | rty   |  |   |  | 12/1   |
| category v<br>responsibl<br>write your | ategory, separately list and d<br>where you think it fits best. It<br>le for supplying correct infor<br>name and case number (if k<br>Describe Each Residend   | Be as complete and mation. If more spannown). Answer ever | d accurate as possible<br>ace is needed, attach<br>ery question.                                   | e. If two married people<br>a separate sheet to th  | e are filing together, both a is form. On the top of any a   | re equally   |
| 1. Do you                              | u own or have any legal or ed<br>No. Go to Part 2  | uitable interest in                                       | any residence, buildi  | ng, land, or similar pro                            | perty?   |  |
|  |  |   |  |   |  |  |
| 1.1                                    | Yes. Where is the property?  Street address, if available, or  |   | What is the property?  Single-family home Duplex or multi-uni                                      |   | the amount of any secu   | claims or exemptions. Put red claims on Schedule D: hims Secured by Property.  |
|  |  |   | Condominium or co  | ooperative  | Current value of the entire property?  | Current value of the portion you own?  |
|  | Number Street  City State  | Zip Code  | Land Investment property Timeshare Other   | у   | Describe the nature of interest (such as fee such as f | simple, tenancy by   |
|  | , and the second | ·   | one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor  | n the property? Check or 2 only debtors and another | Check if this is co<br>(see instructions)  | mmunity property   |
|  |  |   | ш  | u wish to add about this                            | s item, such as local  |  |
| If you                                 | own or have more than one, li  |   | property identification  | n number <u>:</u>                                   |  |  |
| 1.2                                    | Street address, if available, or   |   | What is the property?  Single-family home Duplex or multi-uni Condominium or or Manufactured or m  | it building<br>ooperative                           | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D:</i> ims <i>Secured by Property.</i> Current value of the portion you own? |
|  | Number Street  City State  | Zip Code  | Land Investment property Timeshare Other   | у   | Describe the nature o<br>interest (such as fee s<br>the entireties, or a life  | simple, tenancy by   |
|  | - , State  |   | Who has an interest in one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the o | debtors and another  wish to add about this         | (see instructions)   | mmunity property   |

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| Debtor 1                     | Jerry  |   | Hill Case num   | ber (if known)  |   |
|------------------------------|--|---|---|---|---|
|                              | First Name   | Middle Name                                 | Last Name   |   |   |
| 1.3<br>Stre                  | et address, if available, or o                             |   | What is the property? Check all that apply.  Single-family home   | the amount of any secu  | claims or exemptions. Put ired claims on <i>Schedule D:</i> nims Secured by Property.               |
|                              |  |   | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home  | Current value of the entire property?   | Current value of the portion you own?   |
| Nun                          | nber Street State  | Zip Code                                    | Land Investment property  Timeshare   | Describe the nature o<br>interest (such as fee s<br>the entireties, or a life | simple, tenancy by  |
| Sily                         | Claic  |   | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this iter property identification number: | (see instructions)  | ommunity property   |
|                              | the dollar value of the pove attached for Part 1. W        | ortion you own for                          | all of your entries from Part 1, including any entr   | ies for pages   |   |
| <b>o you ow</b><br>ou own tl | hat someone else drives. If uns, trucks, tractors, sport u | r equitable interes<br>you lease a vehicle, | It in any vehicles, whether they are registered or<br>also report it on Schedule G: Executory Contracts an<br>rcycles   |   |   |
| 3.1                          | Make<br>Model:<br>Year:                                    | Ford<br>Explorer<br>2013                    | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any seco  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.         |
|                              | Approximate mileage: Other information:                    |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Current value of the entire property?<br>\$9925.00                            | Current value of the portion you own? \$9925.00   |
|                              |  |   | Check if this is community property (see instructions)  |   |   |
| 3.2                          | Make<br>Model:<br>Year:                                    | Cadillac  Deville 2003                      | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any seco  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>laims <i>Secured by Property.</i> |
|                              | Approximate mileage: Other information:                    | 100000                                      | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Current value of the entire property? \$850.00                                | Current value of the portion you own?   |
|                              |  |   | Check if this is community property (see instructions)  |   |   |

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| 3.3 Make   | ebtor 1 |                             |                      | Hill                         | Case number          | er (if known)           |                                       |  |
|--|---------|-----------------------------|----------------------|------------------------------|----------------------|-------------------------|---------------------------------------|--|
| Model: Year: Approximate mileage: Debtor 1 only Debtor 2 only Current value of the entire property?  Al teast one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Approximate mileage: Debtor 1 and Debtor 2 only  At teast one of the debtors and another Check if this is community property (see instructions)  Model: Year: Approximate mileage: Debtor 1 only At teast one of the debtors and another Check if this is community property (see instructions)  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Who has an interest in the property? Check one. Approximate mileage: Debtor 1 only Debtor 2 only Other information:  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Current value of the entire property?  Do not deduct secured claims or exemption and another claims of exemption and accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Who has an interest in the property? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 an |         | First Name                  | Middle Name          | Last Name                    |                      |                         |                                       |  |
| Approximate mileage:   | 3.3     | Model:                      |                      | one.                         | e property? Check    | the amount of any secu  | red claims on Schedule                |  |
| Other information:    Debtor 1 and Debtor 2 only   At least one of the debtors and another   Check if this is community property (see instructions)  |         |                             |                      |                              |                      | Current value of the    | Current value of the                  |  |
| At least one of the debtors and another  Check if this is community property (see instructions)  3.4 Make Model: Year:  Debtor 1 only Approximate mileage: Debtor 1 and Debtor 2 only Current value of the entire property?  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Who has an interest in the property? Check one. Debtor 1 only Yes  4.1 Make Who has an interest in the property? Check one. Debtor 1 only Approximate mileage: Debtor 1 and Debtor 2 only Current value of the entire property?  At least one of the debtors and another Check if this is community property (see instructions)  Debtor 1 only Debtor 1 only Debtor 1 only Current value of the entire property?  Current value of the control of the entire property?  Current value of the control of the entire property?  Current value of the entire property?  Current value of the entire property?  Current value of the control of the entire property?  Debtor 1 only Debtor 1 only Debtor 2 only Current value of the entire property?   |         | Other information:          |                      |                              | nnly                 |                         | portion you own?                      |  |
| Check if this is community property (see instructions)  3.4 Make   |         | Other information.          |                      |                              | •                    |                         |                                       |  |
| Instructions   Inst   |         |                             |                      |                              |                      |                         |                                       |  |
| Model: Year: Approximate mileage: Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another Check if this is community property (see instructions)  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  ✓ No  Yes  4.1 Make Model: Year: Approximate mileage: Other information:  Who has an interest in the property? Check one. Other information:  Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Current value of the entire property?  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)   |         |                             |                      |                              | anity property (see  |                         |                                       |  |
| Debtor 1 only   Current value of the entire property?   Current value of the entire property?  | 3.4     |                             |                      |                              | property? Check      |                         | · · · · · · · · · · · · · · · · · · · |  |
| Approximate mileage:  Other information:  Othe |         |                             |                      |                              |                      |                         |                                       |  |
| Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  No  Yes  4.1 Make Model: Year: Approximate mileage: Other information:  Who has an interest in the property? Check one. Other information:  At least one of the debtors and another Check if this is community property? Check one. Other information:  Debtor 1 only At least one of the debtors and another Current value of the entire property?  Current value of the entire property?  Current value of the entire property?  Do not deduct secured claims or exemption the amount of any secured claims or exemption the amount of any secured claims on Sch. Creditors Who Have Claims Secured by P. Current value of the entire property?  At least one of the debtors and another Check if this is community property (see instructions)  Do not deduct secured claims or exemption the amount of any secured claims or exemption the entire property?  Current value of the entire property?  |         |                             |                      |                              |                      |                         |                                       |  |
| At least one of the debtors and another    Check if this is community property (see instructions)    At least one of the debtors and another   Check if this is community property (see instructions)    No  |         |                             |                      |                              |                      |                         | Current value of the                  |  |
| Check if this is community property (see instructions)  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  ✓ No  ☐ Yes  4.1 Make  |         | Other information:          |                      |                              | •                    | —————                   | portion you own:                      |  |
| Instructions   |         |                             |                      |                              |                      |                         |                                       |  |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  V No  Yes  4.1 Make  |         |                             |                      |                              | unity property (see  |                         |                                       |  |
| Year: Approximate mileage: Other information: Debtor 2 only Debtor 2 only  At least one of the debtors and another Model: Year: Approximate mileage: Debtor 1 and Debtor 2 only  At least one of the property? Check one.  Debtor 1 only  Who has an interest in the property? Check one. Debtor 1 only Approximate mileage: Debtor 1 only  Debtor 2 only  Current value of the entire property? Do not deduct secured claims or exempting the amount of any secured claims on Scharles Creditors Who Have Claims Secured by Property (see instructions)  Other information:  At least one of the debtors and another Current value of the entire property?   | 4.1     |                             |                      | Who has an interest in the   | property? Check      |                         | •                                     |  |
| Approximate mileage:  Other information:  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Year: Approximate mileage:  Other information:  Debtor 1 only Debtor 2 only  Debtor 2 only  Debtor 2 only  Current value of the entire property?  Do not deduct secured claims or exempting the amount of any secured claims on Schaele Creditors Who Have Claims Secured by Property (see instructions)  At least one of the debtors and another  Check if this is community property (see instructions)   |         |                             |                      |                              |                      |                         |                                       |  |
| Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Year: Approximate mileage:  Other information:  Debtor 1 only Debtor 1 only Debtor 2 only  Current value of the entire property?  Check if this is community property (see instructions)  |         |                             |                      |                              |                      |                         | , ,                                   |  |
| At least one of the debtors and another    Check if this is community property (see instructions)  |         | Other information:          |                      |                              | nnly                 |                         | portion you own?                      |  |
| 4.2 Make Model: Year: Approximate mileage: Other information:  Check if this is community property (see instructions)  Do not deduct secured claims or exempting the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (see instructions)   |         | Other information.          |                      |                              | •                    |                         |                                       |  |
| 4.2 Make Model: Year: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: Other information:  Do not deduct secured claims or exempting the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Proceeding the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Proceeding the entire property?  Current value of the entire property?  At least one of the debtors and another Check if this is community property (see instructions)  |         |                             |                      |                              |                      |                         |                                       |  |
| Model: Year: Approximate mileage: Other information:  Debtor 1 only Debtor 2 only  Debtor 2 only  At least one of the debtors and another Check if this is community property (see instructions)  The amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property (and the amount of any secured by Property (and the amount  |         |                             |                      |                              | anity property (see  |                         |                                       |  |
| Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only Other information: Current value of the entire property? Current value of the entire property?  Current value of the entire property?  Current value of the entire property?  Current value of the entire property?  Current value of the entire property?  Check if this is community property (see instructions)   | 4.2     | Make                        |                      | Who has an interest in the   | property? Check      | Do not deduct secured   | claims or exemptions. F               |  |
| Approximate mileage:  Other information:  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Current value of the entire property?  Current value of the entire property?   |         |                             |                      |                              |                      |                         |                                       |  |
| Other information:  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Current value of the entire property?  portion you own   |         |                             |                      | <b>=</b> '                   |                      | Creditors vvno mave Cla | ums securea by Propen                 |  |
| At least one of the debtors and another  Check if this is community property (see instructions)  |         | Approximate mileage.        |                      |                              |                      |                         | Current value of the                  |  |
| Check if this is community property (see instructions)   |         | Other information:          |                      |                              | •                    | entire property?        | portion you own?                      |  |
| instructions)  |         |                             |                      | At least one of the debto    | ors and another      |                         |                                       |  |
| Add the dellar value of the parties you our for all of your entries from Bort 2, including any entries for page  |         |                             |                      |                              | unity property (see  |                         |                                       |  |
| Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages   | . Add   | the dollar value of the por | tion you own for all | of your entries from Part 2, | including any entrie | es for pages            | 0775.00                               |  |

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Hill Debtor 1 Jerry Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cellular Phone \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Costume Jewelry \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$650.00 for Part 3. Write that number here .....

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Hill Debtor 1 Jerry Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Netspend Cash Card <u>\$</u>28.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Jerry                               |  | Hill                       | Case number (if known)                      |   |
|------|---|--|----------------------------|---|---|
|      | First Name                                | Middle Name  | Last Name                  |   |   |
| 20.  | Negotiable instruments                    | orate bonds and other negotial<br>include personal checks, cashiers'<br>ents are those you cannot transfer | checks, promissory no      | ites, and money orders.                     |   |
|      | Yes. Give specific information about them | Issuer name:   |                            |   |   |
|      |   |  |                            |   |   |
| 21   | Retirement or pension                     | accounts   |                            |   |   |
|      | Examples: Interests in II                 |  | , thrift savings account   | s, or other pension or profit-sharing plans |   |
|      | ✓ No  Yes. List each                      | Type of account:   | Institution name:          |   |   |
|      | account separately.                       | 401(k) or similar plan:  |                            |   |   |
|      |   | Pension plan:  |                            |   |   |
|      |   | IRA:   |                            |   |   |
|      |   | Retirement account:  |                            |   |   |
|      |   | Keogh:   |                            |   |   |
|      |   | Additional account:  |                            |   |   |
| 00   | One distribution                          | Additional account:  |                            |   |   |
| 22.  |   | prepayments d deposits you have made so that with landlords, prepaid rent, public                          |                            |   |   |
|      | Yes                                       | Electric:  |                            |   |   |
|      | _   | Gas:   |                            |   |   |
|      |   | Heating oil:   |                            |   |   |
|      |   | Security deposit on rental unit:   |                            |   |   |
|      |   | Prepaid rent:  |                            |   |   |
|      |   | Telephone:   |                            |   |   |
|      |   | Water:   |                            |   |   |
|      |   | Rented furniture:  |                            |   |   |
|      |   | Other:   |                            |   |   |
| 23.  | _   | or a periodic payment of money to  | you, either for life or fo | r a number of years)                        |   |
|      | ✓ No  Yes                                 | Issuer name and description:   |                            |   |   |
|      |   |  |                            |   | _ |
|      |   |  |                            |   |   |
|      |   |  |                            |   |   |

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| Debt | or 1 Jerry<br>First Name  | Middle Name  | Hill Case number (if known)  |   |
|------|---|--|--|---|
| 24.  |   |  | Last Name<br>ed ABLE program, or under a qualified state tuition program.  |   |
|      | 26 U.S.C. §§  | 530(b)(1), 529A(b), and 529(b)(1).   |  |   |
|      | ✓ No  Yes   | Institution name and description. Separately fil   | e the records of any interests.11 U.S.C. § 521(c):   |   |
|      |   |  |  | _   |
|      |   |  |  | -   |
| 25.  |   |  | an anything listed in line 1), and rights or powers  |   |
|      | No No   | or your benefit  |  |   |
|      | Yes. Desc   | ribe   |  |   |
|      |   |  |  |   |
| 26.  | -   | rights, trademarks, trade secrets, and other ernet domain names, websites, proceeds from it  |  |   |
|      | <b>✓</b> No   |  |  |   |
|      | Yes. Desc   | ribe   |  |   |
| 27.  | Licenses fra  | nchises, and other general intangibles   |  |   |
| 21.  |   |  | ssociation holdings, liquor licenses, professional licenses  |   |
|      | <b>✓</b> No   |  |  |   |
|      | Yes. Desc   | ribe   |  |   |
|      |   |  |  |   |
|      |   |  |  |   |
| Mor  | ney or propei   | ty owed to you?  |  | Current value of the portion you own?  Do not deduct secured claims or exemptions.  |
|      | ney or propei   |  |  | portion you own?  |
|      | Tax refunds o   | wed to you   |  | portion you own?  Do not deduct secured claims or exemptions.   |
|      | Tax refunds or No Yes. Give s   |  | Federal:   | portion you own? Do not deduct secured claims or exemptions.  |
|      | Tax refunds or  No Yes. Give s about  | wed to you specific information  | Federal:<br>State:   | portion you own?  Do not deduct secured claims or exemptions.   |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and f   | specific information t them, including whether already filed the returns the tax years   |  | portion you own? Do not deduct secured claims or exemptions.  |
| 28.  | Tax refunds or  No Yes. Give s about you a and t  | specific information t them, including whether already filed the returns the tax years   | State:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  |
| 28.  | Tax refunds or  No Yes. Give s about you a and t  | specific information t them, including whether already filed the returns the tax years   | State:  Local:  hild support, maintenance, divorce settlement, property settlemen  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                      |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past  | specific information t them, including whether already filed the returns the tax years   | State: Local: hild support, maintenance, divorce settlement, property settlemen Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00                           |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past  | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, c                       | State: Local: hild support, maintenance, divorce settlement, property settlemen Alimony: Maintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00                     |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past  | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, c                       | State:  Local:  hild support, maintenance, divorce settlement, property settlement  Alimony:  Maintenance:  Support:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds or  ✓ No  Yes. Give sabout you a and fi  Family support Examples: Past  | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, c                       | State: Local:  hild support, maintenance, divorce settlement, property settlement  Alimony:  Maintenance: Support:  Divorce settlement:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00                     |
| 28.  | Tax refunds or  No Yes. Give s about you a and to  Family suppor Examples: Past No Yes. Give s  | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, c                      | State:  Local:  hild support, maintenance, divorce settlement, property settlement  Alimony:  Maintenance:  Support:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds or  ✓ No  ✓ Yes. Give s about you a and to  Family support Examples: Past ✓ No  ☐ Yes. Give s  Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, c specific information  | State: Local:  hild support, maintenance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: oility benefits, sick pay, vacation pay, workers' compensation, | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds or  ✓ No  ✓ Yes. Give s about you a and to  Family support Examples: Past ✓ No  ☐ Yes. Give s  Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years   t due or lump sum alimony, spousal support, c specific information | State: Local:  hild support, maintenance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: oility benefits, sick pay, vacation pay, workers' compensation, | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp            | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, c specific information  | State: Local:  hild support, maintenance, divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: oility benefits, sick pay, vacation pay, workers' compensation, | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb  | tor 1 Jerry                                       |                           | Hill   | Case number (if known)                         |  |
|------|---|---------------------------|--|--|--|
|      | First Name  | Middle Name               | Last Name  |  |  |
| 31.  | Interests in insurance                            |                           | th savings account (HSA): credit                                 | homeowner's, or renter's insurance             |  |
|      | ✓ No  Yes. Name the insu of each policy and I     | rance company             | Company name:  | Beneficiary:                                   | Surrender or refund value:                 |
| 32.  |   |                           |  | icy, or are currently entitled to receive      |  |
|      | ✓ No ☐ Yes. Describe                              |                           |  |  |  |
| 33.  |   |                           | ou have filed a lawsuit or mad<br>rance claims, or rights to sue | e a demand for payment                         |  |
|      | ✓ No Yes. Describe                                |                           |  |  |  |
| 34.  | Other contingent and to set off claims            | unliquidated claims of e  | every nature, including counte                                   | rclaims of the debtor and rights               |  |
|      | No Yes. Describe                                  |                           |  |  |  |
| 35.  | Any financial assets yo                           | ou did not already list   |  |  |  |
|      | ✓ No Yes. Describe                                |                           |  |  |  |
| 36.  |   | •                         | Part 4, including any entries                                    |  | \$28.00                                    |
| Part | 5: Describe Any Ri                                | isiness-Related Proj      | perty You Own or Have an   | Interest In. List any real estate in Pa        | rt 1                                       |
|      |   |                           |  |  | 1  |
| 37.  | No. Go to Part 6.                                 | ny legal or equitable int | erest in any business-related p                                  | property?                                      | Current value of the portion you own?      |
|      | Yes. Go to line 38.                               |                           |  |  | Do not deduct secured claims or exemptions |
| 38.  | —   | or commissions you alre   | ady earned   |  |  |
|      | Yes. Describe                                     |                           |  |  |  |
| 39.  | Office equipment, furn<br>Examples: Business-rela |                           | modems, printers, copiers, fax r                                 | nachines, rugs, telephones, desks, chairs, ele | ctronic devices                            |
|      | ✓ No  Yes. Describe                               |                           |  |  |  |
|      |   |                           |  |  |  |

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| Deb      | tor 1 Jerry                  | Hill Case number (if known)   |                                       |
|----------|------------------------------|---|---------------------------------------|
| 1.0      | First Name                   | Middle Name Last Name   |                                       |
| 40.      | machinery, fixtures, equip   | pment, supplies you use in business, and tools of your trade                          |                                       |
|          | <b>✓</b> No                  |   |                                       |
|          | Yes. Describe                |   |                                       |
|          |                              |   |                                       |
| 11       | Inventory                    |   |                                       |
| 41.      | Inventory                    |   |                                       |
|          | ✓ No                         |   |                                       |
|          | Yes. Describe                |   |                                       |
|          |                              |   |                                       |
| 42       | Interests in partnerships    | or joint ventures   |                                       |
|          |                              | or joint tontailed  |                                       |
|          |                              | Name of entity: % of ownership:   |                                       |
|          | Yes. Give specific           | ,   |                                       |
|          | information about them       | <del></del>   | <del></del>                           |
|          |                              |   |                                       |
|          |                              |   |                                       |
| 43       | Customer lists, mailing list | ts or other compilations  | <del></del>                           |
| 10.      |                              | is, or smort complications  |                                       |
|          | ✓ No                         |   |                                       |
|          | Yes. Do your lists inclu     | de personally identifiable information (as defined in 11 U.S.C. § 101(41A))?          |                                       |
|          | No                           |   |                                       |
|          | Yes. Describe.               |   |                                       |
|          |                              |   |                                       |
| 44.      | Any business-related prop    | perty you did not already list  |                                       |
|          | <b>✓</b> No                  |   |                                       |
|          | Yes. Give specific           |   |                                       |
|          | information                  |   |                                       |
|          |                              |   |                                       |
|          |                              |   |                                       |
|          |                              |   |                                       |
|          |                              |   | <u> </u>                              |
|          |                              |   |                                       |
|          |                              | -   | <del></del>                           |
| 45 A     | dd tha dallau valva af all a | fusive autoing from Dout E. including any autoing for pages you have attached         |                                       |
|          |                              | if your entries from Part 5, including any entries for pages you have attached<br>ere |                                       |
| <u> </u> |                              |   |                                       |
| Part     |                              | n- and Commercial Fishing-Related Property You Own or Have an Interest                | i <b>n.</b>                           |
|          |                              | erest in farmland, list it in Part 1.   |                                       |
| 46.      | Do you own or have any l     | egal or equitable interest in any farm- or commercial fishing-related property?       |                                       |
|          | No. Go to Part 7.            |   | Current value of the portion you own? |
|          | Yes. Go to line 47.          |   | Do not deduct secured claims          |
|          |                              |   | or exemptions                         |
| 47.      | Farm animals                 |   |                                       |
|          | Examples: Livestock, poulti  | ry, farm-raised fish  |                                       |
|          | <b>✓</b> No                  |   |                                       |
|          | Yes. Describe                |   |                                       |
|          |                              |   |                                       |
|          |                              |   |                                       |

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| Debt         | tor 1    | Jerry<br>First Name            | Middle Name   | Hill<br>Last Name       | Case number (if known)         |              |
|--------------|----------|--------------------------------|---|-------------------------|--------------------------------|--------------|
| 48.          | Cro      | ps-either growing              |   |                         |                                |              |
|              | <b>✓</b> | No<br>Yes. Describe            |   |                         |                                |              |
| 49.          | Far      | m and fishing equip            | oment, implements, machinery, fixtu                                     | res, and tools of trade |                                |              |
|              |          | Yes. Describe                  |   |                         |                                |              |
| 50.          | Far      |                                | lies, chemicals, and feed   |                         |                                |              |
|              |          | Yes. Describe                  |   |                         |                                |              |
| 51.          | Any      | y farm- and comme              | rcial fishing-related property you did                                  | not already list        |                                |              |
|              |          | No<br>Yes. Describe            |   |                         |                                |              |
|              |          |                                | l of your entries from Part 6, includin                                 |                         | ou have attached               |              |
|              |          | Dagariba All Dug               | wante Van Ouw an Have an Intern   | antin That You Did No   | Alica Abassa                   |              |
| Part 53.     |          |                                | perty You Own or Have an Inter<br>perty of any kind you did not already |                         | ot List Above                  |              |
|              | Еха      |                                | s, country club membership  |                         |                                |              |
|              |          | No                             |   |                         |                                |              |
|              | Ш        | Yes. Give specific information |   |                         |                                |              |
| 54 A         | qq +I    | ne dollar value of al          | l of your entries from Part 7. Write th                                 | nat number here         |                                | •            |
| J4. A        | uu ti    | le donai value oi ai           | ron your entries from rait r. write to                                  | iat number nere         |                                |              |
|              |          |                                |   |                         |                                |              |
| Part         | 8:       | List the Totals of             | Each Part of this Form  |                         |                                |              |
| 55. <b>I</b> | Part     | 1: Total real estate           | , line 2  |                         |                                |              |
| 56.          | oart     | 2 total vehicles, lin          | e 5   | \$10775.00              |                                |              |
| 57. <b>P</b> | art 3    | 3: Total personal an           | d household items, line 15  | \$650.00                |                                |              |
| 58. <b>P</b> | art 4    | 4: Total financial as          | sets, line 36   | \$28.00                 |                                |              |
| 59. <b>i</b> | Part     | 5: Total business-re           | elated property, line 45  |                         |                                |              |
| 60. <b>I</b> | Part     | 6: Total farm- and f           | ishing-related property, line 52  |                         |                                |              |
| 61. <b>I</b> | Part     | 7: Total other prop            | erty not listed, line 54  |                         |                                |              |
| 62. 1        | Γota     | l personal property.           | Add lines 56 through 61   | \$11453.00              | Copy personal property total ▶ | + \$11453.00 |
| 63. <b>T</b> | otal     | of all property on S           | chedule A/B. Add line 55 + line 62                                      |                         |                                | \$11453.00   |

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|                                 | e C: The Property                |             | as Exempt ople are filing together, both are equal | 12/15               |
|---------------------------------|----------------------------------|-------------|--|---------------------|
|                                 | Form 106C                        | V Ol - '    |  | amended filing      |
| (If known)                      | -                                |             |  | Check if this is an |
| United States I                 | Bankruptcy Court for the: Northe | m           | District of Illinois (State)                       |                     |
| Debtor 2<br>(Spouse, if filing) | First Name                       | Middle Name | Last Name  |                     |
|                                 | First Name                       | Middle Name | Last Name  |                     |
| Debtor 1                        | Jerry                            |             | Hill   |                     |

information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai  | Part 1: Identify the Property You Claim as Exempt  |                                     |                                   |  |  |  |  |
|--|--|-------------------------------------|-----------------------------------|--|--|--|--|
| 1.   | Which set of exemptions are you claiming   | ng? Check one only, ev              | en if                             | your spouse is filing with you.  |  |  |  |
| You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) |  |                                     |                                   |  |  |  |  |
|  | You are claiming federal exemption   | s. 11 U.S.C. § 522(b)(              | 2)                                |  |  |  |  |
| 2.   | For any property you list on Schedule A  | /B that you claim as e              | xemp                              | ot, fill in the information below.   |  |  |  |
|  | Brief description of the property and line on Schedule A/B that lists this   | Current value of the portion you    | Amount of the exemption you claim |  | Specific laws that allow exemption           |  |  |
|  | property   | own                                 | Ch                                | eck only one box for each exemption.   |  |  |  |
|  |  | Copy the value from<br>Schedule A/B |                                   |  |  |  |  |
|  | Brief description:   | \$9,925.00                          | <b>✓</b>                          | \$0  | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |  |  |
|  | Ford Explorer, 2013 Line from  |                                     | П                                 | 100% of fair market value, up to any   | _  |  |  |
|  | Schedule A/B: 03   |                                     |                                   | applicable statutory limit   |  |  |  |
|  | Brief  |                                     |                                   |  | 735 ILCS 5/12-1001(a)                        |  |  |
|  | description:   | \$300.00                            | ✓                                 | \$300.00   |  |  |  |
|  | Used Clothing Line from Schedule A/B: 11   |                                     |                                   | 100% of fair market value, up to any applicable statutory limit                    | _  |  |  |
| 3.   | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covery Yes | ery 3 years after that for          | cases                             | filed on or after the date of adjustment.)  1,215 days before you filed this case? |  |  |  |

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Hill Debtor 1 Jerry Case number (if known) Middle Name Last Name First Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$28.00 description: **✓** \$28.00 Other financial account, Netspend Cash Card 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$200.00 description: **✓** \$200.00 **Cellular Phone** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS Brief \$850.00 5/12-1001(b) description:  $\checkmark$ \$850.00; \$0.00 Cadillac Deville, 2003 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$150.00 description: **✓** \$150.00

100% of fair market value, up to any

applicable statutory limit

**Costume Jewelry** 

12

Line from

Schedule A/B:

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|                 |                       |   | Do                         | cument Page 22 of  | 69  |   |                                       |
|-----------------|-----------------------|---|----------------------------|--|---|---|---------------------------------------|
| Fill in         | this infor            | mation to identify your ca  | se:                        |  |   |   |                                       |
| Debto           | or 1                  | Jerry   |                            | Hill   |   |   |                                       |
|                 |                       | First Name  | Middle Name                | Last Name  |   |   |                                       |
| Debto<br>(Spous | or 2<br>e, if filing) | First Name  | Middle Name                | Last Name  |   |   |                                       |
| United          | d States B            | ankruptcy Court for the:  | Northern                   | District of Illinois   |   |   |                                       |
| 0               |                       |   |                            | (State)  |   |   |                                       |
| (If knov        | number<br>vn)         |   |                            |  |   |   |                                       |
| Off             | icial                 | Form 106D   |                            |  | _   |   | Check if this is an<br>amended filing |
| Scl             | hedu                  | le D: Credito   | ors Who Ha                 | ve Claims Secure   | ed by Prop  | ertv  | 12/15                                 |
| 1. [            | Do any c<br>No. 0     | number (if known).  reditors have claims see  Check this box and subm  Fill in all of the information  All Secured Claims | nit this form to the court | ty?<br>with your other schedules. You hav  | ve nothing else to repo   | ort on this form.                                     |                                       |
| 2.              | separate              | ly for each claim. If more th   | nan one creditor has a par | cured claim, list the creditor<br>ticular claim, list the other creditors<br>order according to the creditor's | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any     |
| 2.1             | CHGO A                |   | Describe the property      | that secures the claim:  | \$19,513.00   | \$9,925.00  | \$9,588.00                            |
|                 | Creditor's<br>6231 N  | Name<br>Western Ave   | 2013 Ford Explorer         |  |   |   |                                       |
|                 | Numbe                 |   |                            | , the claim is: Check all that apply.  | •   |   |                                       |
|                 |                       |   | Contingent                 |  |   |   |                                       |
|                 | Chicago<br>City       | IL 60659<br>State ZIP Code  | Unliquidated               |  |   |   |                                       |
|                 | ,                     | es the debt? Check one.   | Disputed                   |  |   |   |                                       |
|                 | <b>✓</b> Deb          | tor 1 only  | Nature of lien. Check a    | all that apply.  |   |   |                                       |
|                 |                       | tor 2 only  | An agreement you car loan) | made (such as mortgage or secured  |   |   |                                       |
|                 |                       | tor 1 and Debtor 2 only   | _ ′                        | as tax lien, mechanic's lien)  |   |   |                                       |
|                 |                       | ast one of the debtors<br>another   | Judgment lien from         | n a lawsuit  |   |   |                                       |
|                 |                       | ck if this claim relates community debt   | Other (including a ri      | ight to offset)  |   |   |                                       |
|                 | Date de incurred      | bt was  | Last 4 digits of accou     | nt number9534  |   |   |                                       |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$19,513.00

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| Fill in th  | his inforn  | nation to identify your c   | case:   |  |  |  |   |  |
|---|---|---|---|--|--|--|---|--|
| Debtor  | 1   | Jerry   |   | Hill   |  |  |   |  |
| Debtor  | 2   | First Name  | Middle Name   | Last Name  |  |  |   |  |
| (Spouse,  | if filing)  | First Name  | Middle Name   | Last Name  |  |  |   |  |
| United  | States Ba   | ankruptcy Court for the:  | Northern  | District of Illinois (State)   |  |  |   |  |
| Case n  |   |   |   | . ,  |  |  |   |  |
| Offic   | ial Fo  | orm 106E/F  |   |  |  | Chec   | k if this is an   | amended filing                                 |
| Sch   | iedu  | ile E/F: Cre  | editors Who   | o Have Unsecure  | d Claims   |  |   | 12/15  |
| other part 1: Claims the enticknown) Part 1:  1. Definition | arty to a 06A/B) a that are ries in the List A o any cre            | ny executory contracts<br>nd on Schedule G: Exe<br>listed in Schedule D: C<br>ne boxes on the left. At<br>All of Your PRIORIT   | s or unexpired leases t<br>ecutory Contracts and C<br>Creditors Who Hold Cla            |  | executory contracts<br>G). Do not include a<br>ice is needed, copy | s on <i>Schedu</i><br>iny creditors<br>the Part yo | <i>le A/B: Prop</i><br>s with partia<br>u need, fill it | erty (Official<br>Ily secured<br>t out, number |
| lis<br>As<br>Co   | ist all of<br>sted, iden<br>s much a<br>ontinuation                 | tify what type of claim it<br>s possible, list the claims<br>on Page of Part 1. If mor  | is. If a claim has both pr<br>s in alphabetical order acc<br>re than one creditor holds | as more than one priority unsecured clair<br>iority and nonpriority amounts, list that<br>cording to the creditor's name. If you ha<br>s a particular claim, list the other creditor<br>ns for this form in the instruction bookle   | claim here and show<br>ave more than two pr<br>s in Part 3.        | both priority                                      | and nonprior  | rity amounts.                                  |
| ,   |   | ,   |   |  | •  | Total<br>claim                                     | Priority amount   | Nonpriority amount                             |
|   |   | unty Recorder of Deeds<br>reditor's Name<br>ark   |   | <ul> <li>Last 4 digits of account number _</li> <li>When was the debt incurred?</li> </ul>   | <br>n/a  | \$769.00   | \$769.00  | \$0.00   |
|   | Debt Debt Debt At lea Check Is the cla Yes                          | Street  Illinois State urred the debt? Check or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and the companion of | nd another  | As of the date you file, the claim is apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts yo government Claims for death or personal injuintoxicated Other. Specify Oth                              | n:<br>u owe the<br>ry while you were                               | \$0.00   | \$0.00  | \$0.00   |
| ;   | Priority Ci PO Box 6 Number  Chicago City Who inci Debt Debt At lea | reditor's Name  | nd another  | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is apply Contingent Unliquidated Disputed Disputed Domestic support obligations Taxes and certain other debts yo government Claims for death or personal injuintoxicated Other. Specify | n:<br>u owe the<br>ry while you were                               | \$0.00   | ψ <b>0.00</b>   | 90.00  |

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Debtor 1 Jerry Hill Case number (if known) 
First Name Middle Name Last Name

| Part | 1: Your PRIORITY Unsecured Claims - Continu  | uation Page   |                |                 |                    |
|------|--|---|----------------|-----------------|--------------------|
|      | After listing any entries on this page, number them b  | beginning with 2.3, followed by 2.4, and so forth.  | Total<br>claim | Priority amount | Nonpriority amount |
| 2.3  | IL DEPT OF HEALTHCARE Priority Creditor's Name 509 S 6TH ST Number Street  | Last 4 digits of account number 5031  When was the debt incurred? 4/2017  As of the date you file, the claim is: Check all that apply.  | \$8,020.00     | \$8,020.00      | \$0.00             |
|      | SPRINGFIELD Illinois 62701 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes  | Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  |                |                 |                    |
| 2.4  | IL DEPT OF HEALTHCARE c/o Porcha McKinley Priority Creditor's Name 509 S 6th St Number Street  Springfield Illinois 62701 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only ☐ Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No | When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | \$0.00         | \$0.00          | \$0.00             |
| 2.5  | IRS 1 Priority Creditor's Name PO Box 7346 Number Street  Philadelphia Pennsylvania 19101 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No                        | Last 4 digits of account number  When was the debt incurred?  | \$0.00         | \$0.00          | \$0.00             |

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Hill Debtor 1 Jerry Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 5/3 BANK CC \$5,453.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5050 KINGSLEY DR MD# 1MOC2G 9/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent CINCINATTI Ohio 45263 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_\_ CreditCard Is the claim subject to offset? **✓** No Yes City of Chicago Parking Tickets 4.2 \$4,600.00 Last 4 digits of account number Nonpriority Creditor's Name 333 South State Street, Rm 540 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60604 Chicago Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? **✓** No Yes Comcast \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11621 E. Marginal Way # 5 Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated 98168 Washington Seattle City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other Other. Specify \_ Is the claim subject to offset? **✓** No Yes

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Document Debtor 1 Jerry First Name Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with  | 4.5, followed by 4.6, and so forth.   | Total claim   |
|---|---|---|
| Nonpriority Creditor's Name 3 Lincoln Center Number Street  Bankruptcy Section  Oakbrook Terrace Illinois 60181 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes | When was the debt incurred?   | \$0.00  |
| DEBT RECOVERY SOLUTION  Nonpriority Creditor's Name 900 Merchants Concourse # LL-11  Number Street  Westbury New York 11590 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes | When was the debt incurred? 11/2016  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA                         | \$785.00  |
| ENHANCED RECOVERY CO L  Nonpriority Creditor's Name 8014 BAYBERRY RD  Number Street   JACKSONVILLE Florida 32256 City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?                         | Last 4 digits of account number 9770  When was the debt incurred? 11/2014  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT | \$1,420.00  |
|   | ComEd   Nonpriority Creditor's Name   3 Lincoln Center   Number   Street   Bankruptcy Section   | Nonpriority Creditor's Name   Street   Street |

Yes

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Debtor 1 Jerry Hill Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuati  | on Page   |             |
|--------|---|---|-------------|
|        | After listing any entries on this page, number them beginning   | with 4.5, followed by 4.6, and so forth.  | Total claim |
| 4.7    | GM Financial Nonpriority Creditor's Name ATT: Mandy Youngblood Number Street PO Box 183853  Arlington Texas 76096 City State Zip Code Who incurred the debt? Check one.   | Last 4 digits of account number 8518  When was the debt incurred? 11/2014  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed   | \$4,721.00  |
|        | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  No Yes  | Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify 061 Automobile  |             |
| 4.8    | JEFFERSON CAPITAL SYST Nonpriority Creditor's Name 16 MCLELAND RD Number Street  SAINT CLOUD Minnesota 56303 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No  Yes | When was the debt incurred? 4/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 001 UnknownLoanType | \$1,791.00  |
| 4.9    | Markoff Law LLC Nonpriority Creditor's Name 29 N Wacker Dr #550 Number Street  Chicago Illinois 60606 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes                    | Last 4 digits of account number  When was the debt incurred?  | \$0.00      |

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Hill Debtor 1 Jerry Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$592.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 RENAISSANCE D SUITE 400 When was the debt incurred? 3/2016 Number As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE Illinois 60068 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.11 NORTHWEST COLLECTORS \$190.00 Last 4 digits of account number 0595 Nonpriority Creditor's Name 3601 ALGONQUIN RD STE 23 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** Illinois 60008 Unliquidated **MEADOWS** State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? Other. Specify PAYMENT DATA **✓** No Yes 4.12 Peoples Gas \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Other

✓ No Yes

Is the claim subject to offset?

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| Debtor 1 Jerry                                   | Hill                  | Case number (if known)  |
|--|-----------------------|---|
| First Name Middle                                |                       |   |
| Part 2: Your NONPRIORITY Unsecure                | d Claims - Continuat  | ion Page  |
| After listing any entries on this page,          | number them beginning | g with 4.5, followed by 4.6, and so forth.  Total claim   |
| 4.13 Sprint Corp.                                |                       | — Last 4 digits of account number \$0.00  |
| Nonpriority Creditor's Name<br>PO Box 7949       |                       | When was the debt incurred?   |
| Number Street                                    |                       | <u> </u>  |
| Attn Bankruptcy Dept                             |                       | As of the date you file, the claim is: Check all that apply.  |
|  |                       | Contingent  |
| Overland Park Kansas                             | 66207                 | Unliquidated  |
| City State                                       | Zip Code              | Disputed  |
| Who incurred the debt? Check one.  Debtor 1 only |                       | Type of NONPRIORITY unsecured claim:  |
| Debtor 2 only                                    |                       | Student loans   |
| Debtor 1 and Debtor 2 only                       |                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| At least one of the debtors and anot             | ther                  | Debts to pension or profit-sharing plans, and other similar debts                                       |
| Check if this claim relates to a c               | ommunity debt         | Other. Specify Other  |
| Is the claim subject to offset?                  |                       | <u>——</u>   |
| <b>✓</b> No                                      |                       |   |
| Yes  |                       |   |

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Debtor 1 Jerry Hill Case number (if known)

| First Na                 | me Middle Name Last Name  |         |                                    |                    |
|--------------------------|---|---------|------------------------------------|--------------------|
| Part 4: Add t            | ne Amounts for Each Type of Unsecured Claim   |         |                                    |                    |
|                          | nmounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | tatistical reporting purposes only | y. 28 U.S.C. §159. |
|                          |   |         | Total claims                       |                    |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.     | \$8,020.00                         |                    |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b.     | \$0.00                             |                    |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.     | \$0.00                             |                    |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                   | 6d.     | \$769.00                           |                    |
|                          | 6e. Total. Add lines 6a through 6d.   | 6e.     | \$8,789.00                         |                    |
|                          |   |         | Total claims                       |                    |
| Total claims             | 6f. Student loans   | 6f.     | \$0.00                             |                    |
| from Part 2              | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6g.     | \$0.00                             |                    |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h.     | \$0.00                             |                    |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                                | 6i.     | \$19,552.00                        |                    |
|                          | Gi Total Add lines of through Gi  | e:      | \$19,552.00                        |                    |

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| Fill in this infor     | mation to identify your c | ase:        |                              |  |
|------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1               | Jerry                     |             | Hill                         |  |
|                        | First Name                | Middle Name | Last Name                    |  |
| Debtor 2               |                           |             |                              |  |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name                    |  |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |
| Case number (If known) |                           |             | (State)                      |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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|                |   | D                              | σομποτιά ταξ              | gc 32 01 0     |  |    |
|----------------|---|--------------------------------|---------------------------|----------------|--|----|
| Fill in this   | information to identify your                                  | case:                          |                           |                |  |    |
| Debtor 1       | Jerry   | Madella Nassa                  | Hill                      |                |  |    |
| Debtor 2       | First Name  | Middle Name                    | Last Name                 |                |  |    |
| (Spouse, if fi | ling) First Name  | Middle Name                    | Last Name                 |                |  |    |
| United Sta     | ates Bankruptcy Court for the                                 | Northern                       | District of Illinois      |                |  |    |
| Case num       | nber  |                                | (State)                   |                |  |    |
|                | 15 10011  |                                |                           |                | Check if this is amended filing  | an |
| Offici         | al Form 106H  |                                |                           |                |  |    |
| Sched          | dule H: Your Co   | debtors                        |                           |                | 12/  | 15 |
| •              | nswer every question.  ou have any codebtors? (If y  No  Yes  | ou are filing a joint case, do | not list either spouse a  | s a codebtor.) |  |    |
|                | in the last 8 years, have you<br>o, Louisiana, Nevada, New Me |                                | • •                       | - 1            | ty property states and territories include Arizona, California,  |    |
| <b>✓</b>       | No. Go to line 3. Yes. Did your spouse, form                  | ner spouse, or legal equiva    | alent live with you at th | e time?        |  |    |
|                | ✓ No Yes. In which commun                                     | ity state or territory did yo  | u live?                   | Fill in the    | e name and current address of that person.   |    |
|                | Name of your spouse,  | former spouse, or legal equ    | ivalent                   |                |  |    |
|                | Number Street   |                                |                           |                |  |    |
|                | City  | State                          | Zip (                     | Code           |  |    |
|                |   | -                              | •                         |                | se is filing with you. List the person shown in line 2 the creditor on <i>Schedule D</i> (Official Form 106D), |    |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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| E:11=:1                     | in information to the life  |   |                       |              | _           |                 |  |              |
|-----------------------------|---|---|-----------------------|--------------|-------------|-----------------|--|--------------|
| Fill in th                  | is information to identify  | your case:  |                       |              |             |                 |  |              |
| Debtor 1                    | Jerry   | ۱۸ حالدام:۸   | Hill                  | lama-        |             |                 |  |              |
| Debtor 2                    | First Name  | Middle Name   | Last N                | iame         |             | Che             | ck if this is:   |              |
|                             | filing) First Name  | Middle Name   | Last N                | lame         |             |                 | An amended filing  |              |
| United St                   | tates Bankruptcy Court for  | Northern  | District of III       | inois        |             |                 | A supplement showing post-petitio  | n chapter 13 |
| the:                        | mbor  |   | (5                    | State)       |             |                 | expenses as of the following date:   |              |
| Case nun                    | TIDEI   |   |                       |              |             | Ī               | MM / DD / YYYY   |              |
| Offici                      | al Form 106l  |   |                       |              |             |                 |  |              |
|                             | dule I: Your In   | come  |                       |              |             |                 |  | 12/15        |
| informati<br>spouse. I      | ion about your spouse. I<br>f more space is needed<br>(if known). Answer ever | f you are separated and<br>, attach a separate she<br>y question. | d your spou           | se is n      | ot filing w | ith you, do     | r spouse is living with you, inc<br>not include information about<br>onal pages, write your name a | your         |
|                             |   |   | Debtor 1              | 1            |             |                 | Debtor 2   |              |
|                             | n your employment<br>mation.  |   | Debtor                | '            |             |                 | Deptor 2   |              |
| If you                      | ı have more than one job,   | Employment status   | <b>✓</b> Emplo        | oyed         |             |                 | Employed   |              |
| attach a separate page with |   |   | Not E                 | Not Employed |             |                 | Not Employed   |              |
|                             | nation about additional<br>oyers.   | Occupation  | Self-emplo            | oyment       |             |                 |  |              |
|                             | de part time, seasonal, or  | Employer's name   |                       |              |             |                 |  |              |
| self-e                      | employed work.  | Employer's address  |                       |              |             |                 |  |              |
|                             | pation may include student<br>memaker, if it applies.                         |   | Number St             | reet         |             |                 | Number Street  |              |
|                             |   |   |                       |              |             |                 |  |              |
|                             |   |   | City                  |              | State       | Zip Code        | City State Zi  | p Code       |
|                             |   | How long employed there?  |                       |              |             |                 |  |              |
| Part 2:                     | Give Details About N  | onthly Income   |                       |              |             |                 |  |              |
| Estimat                     | te monthly income as of t   | the date you file this form                                       | <b>n.</b> If you have | nothing      | g to report | for any line, v | rite \$0 in the space. Include your  | non-filing   |
| '                           | unless you are separated.   |   |                       |              |             |                 |  |              |
| _                           | r your non-tiling spouse have<br>pace, attach a separate she                  |   | combine the           | intorma      |             |                 | r that person on the lines below. If   | you need     |
|                             |   |   |                       |              | For Del     | otor 1          | non-filing spouse  |              |
|                             | t monthly gross wages, sala<br>ductions.) If not paid monthly                 | • .   |                       | 2            |             | \$0.00          |  |              |
| 3. <b>Est</b>               | imate and list monthly over   | rtime pay.  |                       | 3            |             | + \$0.00        |  |              |
| 4. Cal                      | <b>Iculate gross income.</b> Add li   | ne 2 + line 3.  |                       | 4.           |             | \$0.00          |  |              |
|                             |   |   |                       | <u></u>      |             |                 |  |              |

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| Debtor 1Jerry First Name Middle Name   | Hill<br>Last Name     | Case number known)         | (if                               |                        |
|--|-----------------------|----------------------------|-----------------------------------|------------------------|
| The traine   | Last Hamo             | For Debtor 1               | For Debtor 2 or non-filing spouse |                        |
| Copy line 4 here   | <b>→</b> 4.           | \$0.00                     |                                   |                        |
| 5. List all payroll deductions:  |                       |                            |                                   |                        |
| 5a. Tax, Medicare, and Social Security deductions  | 5a.                   | \$0.00                     |                                   |                        |
| 5b. Mandatory contributions for retirement plans   | 5b.                   | \$0.00                     |                                   |                        |
| 5c. Voluntary contributions for retirement plans   | 5c.                   | \$0.00                     |                                   |                        |
| 5d. Required repayments of retirement fund loans   | 5d.                   | \$0.00                     |                                   |                        |
| 5e. Insurance  | 5e.                   | \$0.00                     |                                   |                        |
| 5f. Domestic support obligations   | 5f.                   | \$0.00                     |                                   |                        |
| 5g. <b>Union dues</b>  | 5g.                   | \$0.00                     |                                   |                        |
| 5h. Other deductions. Specify:   | 5h.                   | + \$0.00 +                 |                                   |                        |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5h$ .   | e +5f + 5g 6.         | \$0.00                     |                                   |                        |
| 7. Calculate total monthly take-home pay. Subtract line 6 from   | line 4. 7.            | \$0.00                     |                                   |                        |
| 8. List all other income regularly received:   |                       |                            |                                   |                        |
| 8a. Net income from rental property and from operating a business, profession, or farm   |                       |                            |                                   |                        |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, the total monthly net income.  |                       | \$2,550.00                 |                                   |                        |
| 8b. Interest and dividends   | 8b.                   | \$0.00                     |                                   |                        |
| 8c. Family support payments that you, a non-filing spouse dependent regularly receive  | , or a                |                            |                                   |                        |
| Include alimony, spousal support, child support, maintenal divorce settlement, and property settlement.  | nce,<br>8c.           | \$194.00                   |                                   |                        |
| 8d. Unemployment compensation  | 8d.                   | \$0.00                     |                                   |                        |
| 8e. Social Security  | 8e.                   | \$0.00                     |                                   |                        |
| 8f. Other government assistance that you regularly received Include cash assistance and the value (if known) of any not cash assistance that you receive, such as food stamps (bern under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | n-                    | \$0.00                     |                                   |                        |
| 8g. Pension or retirement income   | 8g.                   | \$0.00                     |                                   |                        |
| 8h. Other monthly income. Specify:   | 8h.                   | + \$0.00 +                 |                                   |                        |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +  | 8g + 8h. 9.           | \$2,744.00                 |                                   |                        |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing  | 10.<br>ng spouse      | \$2,744.00 +               | =                                 | \$2,744.00             |
| <ol> <li>State all other regular contributions to the expenses that<br/>Include contributions from an unmarried partner, members of y<br/>friends or relatives.</li> <li>Do not include any amounts already included in lines 2-10 or a</li> </ol>                     | your household, yo    | our dependents, your roomm |                                   |                        |
| Specify:   |                       |                            | 11.                               | . + \$0.00             |
| 12. Add the amount in the last column of line 10 to the amou<br>Write that amount on the <i>Summary of Schedules and Statistica</i>  |                       |                            |                                   | \$2,744.00<br>Combined |
| 13. Do you expect an increase or decrease within the year at   | fter you file this fo | orm?                       |                                   | monthly income         |
| Yes. Explain:  |                       |                            |                                   |                        |

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| Debtor 1 Jerry                           |                      | Hill         |              |              | Case number (if | <br> |  |
|--|----------------------|--------------|--------------|--------------|-----------------|------|--|
| First Name                               | Middle Name          | Last I       | Name         |              | known)          |      |  |
| Official Form 106I. Addition             | ai page.             |              |              |              |                 |      |  |
| 8a.Net income from rental property and   | I from operating a b | ousiness, pr | ofession, or | farm         |                 |      |  |
| 8a.1 Barber                              |                      | Debtor 1     | Debtor 2     |              |                 |      |  |
| Gross receipts (before all deductions)   |                      | \$3,000.00   |              |              |                 |      |  |
| Ordinary and necessary operating expe    | nses -               | \$450.00     |              |              |                 |      |  |
| Net monthly income from a business, farm | orofession, or       | \$2,550.00   |              | Copy<br>here | \$2,550.00      | <br> |  |

Official Form 106l Schedule I: Your Income page 3

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|                                 |                                  | Doc   | ument Page 36 of 6  | 9                 |   |
|---------------------------------|----------------------------------|---|---|-------------------|---|
| Fill in this infor              | mation to identify your          | case:   |   |                   |   |
| Debtor 1                        | Jerry                            |   | Hill  |                   |   |
| Dalatano                        | First Name                       | Middle Name   | Last Name   | Check if this is: |   |
| Debtor 2<br>(Spouse, if filing) | First Name                       | Middle Name   | Last Name   | An amended filing | g   |
| United States E                 | Sankruptcy Court for the         | : Northern  | District of Illinois (State)  |                   | owing post-petition chapter 13 ne following date: |
| Case number<br>(If known)       | -                                |   |   | MM / DD / YYYY    | <u> </u>  |
| Official                        | Form 106J                        |   |   |                   |   |
|                                 | e J: Your Exp                    | penses  |   |                   | 12/15   |
| information. If (if known). Ans |                                  | , attach another sheet to thi                           | are filing together, both are equals form. On the top of any addition |                   |   |
| 1. Is this a joi                |                                  |   |   |                   |   |
| No. Go                          | to line 2                        |   |   |                   |   |
| Yes. Do                         | oes Debtor 2 live in a s         | separate household?                                     |   |                   |   |
|                                 | ¬ No                             | •   |   |                   |   |
| L                               | _                                | ile Official Forms 106.I-2 <i>Exp</i>                   | enses for Separate Household of De                                    | obtor 2           |   |
| 2 Do you hav                    |                                  |   | Sirioco for deparate frodocifora of De                                | 0101 2.           |   |
| Do not list D                   |                                  | vo<br>/es. Fill out this information for                | Dependent's relationship to   | Dependent's       | Does dependent live                               |
| Debtor 2.                       |                                  | each dependent  | Debtor 1 or Debtor 2  | age               | with you?   |
|                                 | penses include<br>f people other | No  |   |                   |   |
| than                            |                                  | ⁄es   |   |                   |   |
| yourself and dependents         | u youi                           |   |   |                   |   |
| Part 2: Estin                   | mate Your Ongoing                | Monthly Expenses  |   |                   |   |
|                                 | of a date after the ban          |   | you are using this form as a sup<br>pplemental Schedule J, check th   | =                 |   |
|                                 |                                  | cash government assistance it on Schedule I: Your Incom |   |                   | Your expenses                                     |
|                                 | or home ownership e              | xpenses for your residence.                             | Include first mortgage payments an                                    | d                 | <b>\$550.00</b>                                   |
| If not incl                     | uded in line 4:                  |   |   |                   |   |
| 4a. Real es                     | state taxes                      |   |   |                   | 4a <b>\$0.00</b>                                  |

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Jerry
 Hill
 Case number (if known)

 Last Name
 Last Name

| First Name   | Middle Name Last Name  |     |               |
|--|--|-----|---------------|
|  |  |     | Your expenses |
| 5. Additional mortgage payments  | for your residence, such as home equity loans                                    | 5.  | \$0.00        |
| 6. Utilities:  |  |     |               |
| 6a. Electricity, heat, natural gas                                       |  | 6a. | \$0.00        |
| 6b. Water, sewer, garbage collec   | tion   | 6b. | \$0.00        |
| 6c. Telephone, cell phone, Interr  | net, satellite, and cable services   | 6c. | \$156.00      |
| 6d. Other. Specify:  |  | 6d  | \$0.00        |
| 7. Food and housekeeping suppli  |  | 7.  | \$350.00      |
| 8. Childcare and children's educa  | ation costs  | 8.  | \$0.00        |
| 9. Clothing, laundry, and dry clea                                       | ning   | 9.  | \$125.00      |
| 10. Personal care products and s   | ervices  | 10. | \$100.00      |
| 11. Medical and dental expenses  |  | 11. | \$0.00        |
| 12. <b>Transportation.</b> Include gas, m<br>Do not include car payments | naintenance, bus or train fare.  | 12. | \$300.00      |
| 13. Entertainment, clubs, recreat  | ion, newspapers, magazines, and books  | 13. | \$0.00        |
| 14. Charitable contributions and   | religious donations  | 14. | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance deduct                    | ed from your pay or included in lines 4 or 20.                                   |     |               |
| 15a. Life insurance  |  | 15a | \$0.00        |
| 15b. Health insurance  |  | 15b | \$0.00        |
| 15c. Vehicle insurance   |  | 15c | \$563.00      |
| 15d. Other insurance. Specify:   |  | 15d | \$0.00        |
| 16. Taxes. Do not include taxes de                                       | ducted from your pay or included in lines 4 or 20.                               |     |               |
| Specify:   |  | 16  | \$0.00        |
| 17. Installment or lease payment   | s:   | .0  |               |
| 17a. Car payments for Vehicle 1  |  | 17a | \$0.00        |
| 17b. Car payments for Vehicle 2  |  | 17b | \$0.00        |
| 17c. Other. Specify:   |  | 17c | \$0.00        |
| 17d. Other. Specify:   |  | 17d | \$0.00        |
|  | aintenance, and support that you did not report as deducted from                 |     | \$0.00        |
|  | l, Your Income (Official Form 106I).<br>support others who do not live with you. | 18. |               |
| Specify:   | support others who do not live with you.   | 19. | \$0.00        |
| -  | not included in lines 4 or 5 of this form or on Schedule I: Your Income.         | 10. |               |
| 20a. Mortgages on other proper   |  | 20a | \$0.00        |
| 20b. Real estate taxes.  |  | 20b | \$0.00        |
| 20c. Property, homeowner's, or   | renter's insurance   | 20c | \$0.00        |
| 20d. Maintenance, repair, and up   | okeep expenses.  | 20d | \$0.00        |
| 20e. Homeowner's association of  | or condominium dues  | 20e | \$0.00        |
|  |  |     |               |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Jerry  |                         | Hill        | Case number (if known) |            |
|---|-------------------------|-------------|------------------------|------------|
| First Name  | Middle Name             | Last Name   |                        |            |
| 21.Other. Specify:  |                         |             | 21                     | \$0.00     |
|   |                         |             |                        |            |
| 22. Calculate your monthly expense  | S.                      |             |                        | \$2,144.00 |
| 22a. Add lines 4 through 21.  |                         |             |                        | \$0.00     |
| 22b. Copy line 22 (monthly expens   | ,,                      |             |                        | \$2,144.00 |
| 22c. Add line 22a and 22b. The res  | ult is your monthly exp | enses.      | 22.                    |            |
| 23. Calculate your monthly net incor  | me.                     |             |                        |            |
| 23a. Copy line 12 (your combined r  | monthly income) from    | Schedule I. | 23a                    | \$2,744.00 |
| 23b. Copy your monthly expenses   | from line 22 above.     |             | 23b                    | \$2,144.00 |
| 23c. Subtract your monthly expense  | , ,                     | ncome.      |                        | \$600.00   |
| The result is your monthly net  | income.                 |             | 23c                    |            |
| For example, do you expect to finismortgage payment to increase or one of the payment to increase or one of |                         |             |                        |            |

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| Fill in this information to identify your case: |                           |             |                      |  |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1  | Jerry                     |             | Hill                 |  |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |  |
| Case number<br>(If known)                       | ,                         |             | (State)              |  |  |  |  |

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to I                                  | help you fill out bankruptcy forms?   |
|     | ✓ No   |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and   |
| ×   | ·  | *   |
| 30  | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date <b>5/1/2017</b>   | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

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|                             | mation to identify   | ,                |                           |   |                               |                                 |          |  |
|-----------------------------|--|------------------|---------------------------|---|-------------------------------|---------------------------------|----------|--|
| Debtor 1                    | Jerry  |                  |                           | Hill                                      |                               |                                 |          |  |
| Debtor 2                    | First Name   |                  | Middle Name               | Last Nam                                  | е                             |                                 |          |  |
| Spouse, if filing)          | First Name   |                  | Middle Name               | Last Nam                                  | е                             |                                 |          |  |
| nited States E              | Bankruptcy Court fo  | or the: Norther  | 'n                        | District of Illino                        |                               |                                 |          |  |
| Case number                 |  |                  |                           | (State                                    | e)<br>                        |                                 |          |  |
| known)                      |  |                  |                           |   |                               |                                 |          | Check if this                                      |
| Official                    | Form 107   | 7                |                           |   |                               |                                 |          | amended fili                                       |
| tateme                      | nt of Final  | -<br>ncial Affa  | airs for In               | dividuals                                 | Filing for                    | r Bankru                        | intev    | 1  |
| formation. I                |  | needed, attac    | h a separate si           |   |                               |                                 |          | supplying correct<br>your name and case            |
| art 1: Give                 | e Details About  | Your Marital     | Status and W              | here You Lived                            | Before                        |                                 |          |  |
| . What is                   | your current mar   | ital status?     |                           |   |                               |                                 |          |  |
|                             |  |                  |                           |   |                               |                                 |          |  |
| ☐ Ma                        | rried  |                  |                           |   |                               |                                 |          |  |
| 느 느                         | rried<br>t married   |                  |                           |   |                               |                                 |          |  |
| ✓ Not                       | t married  | ave you lived a  | nywhere other             | than where you liv                        | ve now?                       |                                 |          |  |
| Not                         | t married<br>the last 3 years, h   | ave you lived a  | nywhere other             | than where you liv                        | ve now?                       |                                 |          |  |
| Not  During t               | t married<br>the last 3 years, h   | -                |                           | than where you liv<br>s. Do not include v |                               | now.                            |          |  |
| Not During t                | t married<br>the last 3 years, h   | -                |                           |   |                               | now.                            |          |  |
| Not  During t  No  Yes      | t married<br>the last 3 years, h   | -                | n the last 3 years        | s. Do not include v                       |                               | now.                            |          | Dates Debtor 2 lived there                         |
| Not  During t  No  Yes      | t married  the last 3 years, h  s. List all of the pla   | -                | n the last 3 years        | s. Do not include v                       | vhere you live I              | now.<br>s Debtor 1              |          |  |
| Not  During t  No  Yes  Det | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  | -                | n the last 3 years  Date: | s. Do not include v<br>s Debtor 1 lived   | Debtor 2:                     | s Debtor 1                      |          | there  Same as Debtor 1                            |
| Not  During t  No  Yes  Det | t married  the last 3 years, h  s. List all of the pla  btor 1:  | -                | Date: there               | s. Do not include v                       | vhere you live I              | s Debtor 1                      |          | there  Same as Debtor 1  From                      |
| During to No Yes            | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  mber Street                           | ces you lived ir | Date: there               | s. Do not include v<br>s Debtor 1 lived   | Debtor 2:                     | s Debtor 1                      |          | there  Same as Debtor 1                            |
| Not  During t  No  Yes  Det | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  mber Street  lianapolis India         | ces you lived in | Dates there               | s. Do not include v                       | Debtor 2:                     | s Debtor 1                      | Zip Code | there  Same as Debtor 1  From                      |
| Not  During t  No  Yes  Det | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  mber Street  lianapolis India         | ces you lived in | Dates there               | s. Do not include v                       | Debtor 2:  Same a  Number Str | s Debtor 1<br>eet               | Zip Code | there  Same as Debtor 1  From                      |
| During to Not Yes           | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  mber Street  ianapolis India  y State | ces you lived in | Dates there               | s. Do not include v                       | Debtor 2:  Same a  Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there  Same as Debtor 1  From To                   |
| During to Not Yes           | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry  mber Street  lianapolis India         | ces you lived in | Date there                | s. Do not include v                       | Debtor 2:  Same a  Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1 |
| During to No Yes            | t married  the last 3 years, h  s. List all of the pla  btor 1:  427 Eagles Berry mber Street  iianapolis India y State  | ces you lived in | Date: there From To       | s. Do not include v                       | Debtor 2:  Same a  Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1 |

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Case number (if known)

Hill

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$3100.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$8000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Link \$970.00 From January 1 of current year until the date you filed for bankruptcy: Link \$2,328.00 For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Jerry

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Hill Debtor 1 Jerry \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| r '            | 1 Jerry   |   |   | Hill                                   |  | Case number                                 | (if known)   |
|----------------|---|---|---|--|--|---|--|
|                | First Name  |   | Middle Name   | Las                                    | t Name                                       |   |  |
| ns<br>or<br>ge | iders include your<br>porations of which                          | relatives; ar<br>n you are ar<br>for a busine | ny general partners<br>n officer, director, p<br>ess you operate as | ; relatives of any elerson in control, | general partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting | who was an insider? ou are a general partner; g securities; and any managing domestic support obligations, |
| <b>✓</b>       | No  |   |   |  |  |   |  |
| Ħ              | l<br>Yes. List all pay  | ments to a                                    | n insider.  |  |  |   |  |
|                | ı   |   |   | Dates of                               | Total amount                                 | Amount you                                  | Reason for this payment  |
|                |   |   |   | payment                                | paid   | still owe                                   |  |
|                | Insider's Name  |   |   |  |  |   |  |
|                | Number Street   |   |   |  |  |   |  |
|                |   | Olata   | 7'- 0-4-  |  |  |   |  |
|                | City  | State   | Zip Code  |  |  |   |  |
|                | Insider's Name  |   |   |  |  |   |  |
|                | Number Street   |   |   |  |  |   |  |
|                |   |   |   |  |  |   |  |
|                | City  | State   | Zip Code  |  |  |   |  |
|                | i <b>der?</b><br>lude payments on<br>  No<br>  Yes. List all payı | _   | ranteed or cosigner   |  | Total amount paid                            | Amount you still owe                        | Reason for this payment  Include creditor's name   |
|                |   |   |   |  |  |   | modude creditor's marrie   |
|                | Insider's Name  |   |   |  |  |   | moduce cleditor's maine  |
|                | Insider's Name  Number Street                                     |   |   |  |  | _   | include cleditor's traine  |
|                |   |   |   |  |  |   | moduce cleditor's maine  |
|                |   | State   | Zip Code  |  |  |   | include cleditor's maine   |
|                | Number Street   | State   | Zip Code  |  |  |   | include cleditor's traine  |
|                | Number Street  City  Insider's Name                               | State   | Zip Code  |  |  |   | include cleditor's maine   |
|                | Number Street  City   | State   | Zip Code  |  |  |   | include cleditor's traine  |
|                | Number Street  City  Insider's Name                               | State   | Zip Code  |  |  |   | Include cleditor's traine  |

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Hill

Debtor 1 Jerry Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title CONTRACT Pending Cook County Circuit Court 2016-M1-116188 Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-116188 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2013 Ford Explorer 04/2017 \$0 CHGO ACCEPT Creditor's Name Explain what happened 6231 N Western Ave Number Street Property was repossessed. Property was foreclosed. Chicago Illinois 60659 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property 2003 Cadillac Deville 01/2017 \$0 City of Chicago Parking Tickets Creditor's Name **Explain what happened** 333 South State Street, Rm 540 Number Street Property was repossessed. Property was foreclosed. Chicago Illinois 60604 Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| ebtor 1 Jerry  |  |   | Hill   | Case number (if.         | KNOWN                                       |                     |
|--|--|---|--|--------------------------|---|---------------------|
| First Name   |  | Middle Name   | Last Name  | <u> </u>                 | •   |                     |
|  |  | ed for bankruptcy, did<br>a payment because y   | d any creditor, including a b<br>ou owed a debt? | ank or financial institu | tion, set off any amou                      | unts from your      |
| <b>✓</b> No  |  |   |  |                          |   |                     |
| Ľ  |  |   |  |                          |   |                     |
| Yes. Fill  | in the details.  |   |  |                          |   |                     |
|  |  |   | Describe the action the                          | e creditor took          | Date action                                 | Amount              |
|  |  |   |  |                          | was taken                                   |                     |
|  |  |   |  |                          |   |                     |
| Creditor's   | s Name   |   | _  |                          |   |                     |
|  |  |   | _  |                          |   |                     |
| Number   | Street   |   |  |                          |   |                     |
|  |  |   | _ Last 4 digits of account                       | number: XXXX-            |   |                     |
|  |  |   |  |                          |   |                     |
| City   | State  | Zip Code  | =  |                          |   |                     |
| City   | State  | Zip Code  |  |                          |   |                     |
| . Within 1 year  | r before you filed   | l for bankruptcy, was   | any of your property in the                      | possession of an assigr  | nee for the benefit of                      | creditors, a court- |
| appointed re   | ceiver, a custod   | ian, or another officia   | al?  |                          |   |                     |
| No.  |  |   |  |                          |   |                     |
| <b>√</b> No  |  |   |  |                          |   |                     |
|  |  |   |  |                          |   |                     |
| Yes  |  |   |  |                          |   |                     |
| Yes  | toin Gifts and (   | Contributions   |  |                          |   |                     |
| Yes  | tain Gifts and   | Contributions   |  |                          |   |                     |
| Yes List Cer   |  |   | d you give any gifts with a t                    | otal value of more than  | \$600 per person?                           |                     |
| Yes  It S: List Cer  Within 2 yea  |  | ed for bankruptcy, di   | d you give any gifts with a t                    | otal value of more than  | \$600 per person?                           |                     |
| Yes  rt 5: List Cer  . Within 2 yea  V No Yes. Fill  | ars before you file I in the details for th a total value o  | ed for bankruptcy, di   | d you give any gifts with a to                   | otal value of more than  | \$600 per person?  Dates you gave the gifts | Value               |
| Yes  rt 5: List Cer  Within 2 yea  No Yes. Fill  Gifts with  | ars before you file I in the details for th a total value o  | ed for bankruptcy, di   |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per pers  | ars before you fild<br>I in the details for<br>th a total value coon   | ed for bankruptcy, did<br>each gift.<br>of more than \$600                            |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per pers  | ars before you file I in the details for th a total value o  | ed for bankruptcy, did<br>each gift.<br>of more than \$600                            |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per pers  | ars before you fild<br>I in the details for<br>th a total value coon   | ed for bankruptcy, did<br>each gift.<br>of more than \$600                            |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Yes  It 5: List Cer  No Yes. Fill  Gifts with per person to   | ars before you file I in the details for th a total value of son  o Whom You Gav   | ed for bankruptcy, did<br>each gift.<br>of more than \$600                            |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Int 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per pers   | ars before you file I in the details for th a total value of son  o Whom You Gav   | ed for bankruptcy, did<br>each gift.<br>of more than \$600                            |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill  Gifts with per person to Number   | ars before you file  I in the details for the a total value of son  O Whom You Gav  Street   | ed for bankruptcy, did<br>each gift.<br>of more than \$600<br>re the Gift             |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  rt 5: List Cer  . Within 2 yea  V No Yes. Fill Gifts with per pers  Person to  Number  City   | I in the details for th a total value con  Whom You Gav  Street  | ed for bankruptcy, die each gift. of more than \$600 ee the Gift Zip Code             |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  rt 5: List Cer  . Within 2 yea  V No Yes. Fill Gifts with per pers  Person to  Number  City   | ars before you file  I in the details for the a total value of son  O Whom You Gav  Street   | ed for bankruptcy, die each gift. of more than \$600 ee the Gift Zip Code             |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Tt 5: List Cer  Within 2 yea  No Yes. Fill  Gifts with per person to Number  City   | I in the details for th a total value con  Whom You Gav  Street  | ed for bankruptcy, die each gift. of more than \$600 ee the Gift Zip Code             |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Int 5: List Cer  Within 2 yea  No Yes. Fill  Gifts with per person to the control of the co | I in the details for the a total value of the a tot | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code           |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per person to the person to the person to the person's to the person to the person's to the person  | I in the details for th a total value con  Whom You Gav  Street  | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code           |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  It 5: List Cer  Within 2 yea  No Yes. Fill Gifts with per person to the person to the person to the person's to the person to the person's to the person  | I in the details for the a total value of the a tot | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code           |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Yes  It 5: List Cer  No Yes. Fill  Gifts with per pers  Person to  Number  City  Person's   | I in the details for the a total value of the atotal value of the  | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code           |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  rt 5: List Cer  . Within 2 yea  V No Yes. Fill Gifts with per person to the control of the  | I in the details for the a total value of the atotal value of the  | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code           |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  rt 5: List Cer  Within 2 yea  No Yes. Fill  Gifts with per person to the control of the con | I in the details for the a total value of the atotal value of the  | ed for bankruptcy, did reach gift.  of more than \$600  re the Gift  Zip Code ou      |  | otal value of more than  | Dates you gave the                          | Value               |
| Yes  Art 5: List Cer  B. Within 2 yea  Yes. Fill  Gifts with per pers  Person to  Number  City  Person's  Person to  Number  City  | I in the details for the a total value of the atotal value of the  | ed for bankruptcy, did reach gift. of more than \$600 re the Gift  Zip Code  Zip Code |  | otal value of more than  | Dates you gave the                          | Value               |

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| Debt | tor 1    |  |                   | Hill                       | Case number (if known           |                         |                    |
|------|----------|--|-------------------|----------------------------|---------------------------------|-------------------------|--------------------|
|      |          | First Name Midd  | le Name           | Last Name                  |                                 |                         |                    |
|      |          |  |                   |                            |                                 |                         |                    |
| 14.  | Wit      | nin 2 years before you filed for ban   | kruptcy, did you  | ı give any gifts or contri | outions with a total value of   | more than \$600         | to any charity?    |
|      | <b>V</b> | No   |                   |                            |                                 |                         |                    |
|      | H        | Yes. Fill in the details for each gift of  | or contribution   |                            |                                 |                         |                    |
|      | Ш        | res. I ill ill the details for each gift   | or corni ibution. |                            |                                 |                         |                    |
|      |          | Gifts or contributions to charities  |                   | Describe what you con      | tributed                        | Date you                | Value              |
|      |          | that total more than \$600   |                   |                            |                                 | contributed             |                    |
|      |          |  |                   |                            |                                 |                         |                    |
|      |          | Charity's Name   |                   |                            |                                 |                         |                    |
|      |          | Chamby C Hame  |                   |                            |                                 |                         |                    |
|      |          |  |                   |                            |                                 |                         |                    |
|      |          | Nl Obs. d  |                   |                            |                                 |                         |                    |
|      |          | Number Street  |                   |                            |                                 |                         |                    |
|      |          | City State Zi  | in Codo           |                            |                                 |                         |                    |
|      |          | City State Zi  | ip Code           |                            |                                 |                         |                    |
| Dowl | ٥.       | List Cortain Lagons  |                   |                            |                                 |                         |                    |
| Part | 6:       | List Certain Losses  |                   |                            |                                 |                         |                    |
|      |          |  |                   |                            |                                 |                         |                    |
| 15.  |          | nin 1 year before you filed for bank   | ruptcy or since   | you filed for bankruptcy   | , did you lose anything beca    | use of theft, fire,     | other disaster, or |
|      | gan      | bling?   |                   |                            |                                 |                         |                    |
|      | <b>V</b> | No   |                   |                            |                                 |                         |                    |
|      | 븸        |  |                   |                            |                                 |                         |                    |
|      | Ш        | Yes. Fill in the details.  |                   |                            |                                 |                         |                    |
|      |          | Describe the property you lost and   | d                 | Describe any insurance     | coverage for the loss           | Date of your            | Value of property  |
|      |          | how the loss occurred  |                   | Include the amount that    |                                 | loss                    | lost               |
|      |          |  |                   | pending insurance claim    | s on line 33 of <i>Schedule</i> |                         |                    |
|      |          |  |                   | A/B: Property.             |                                 |                         |                    |
|      |          |  |                   |                            |                                 |                         |                    |
|      |          |  |                   |                            |                                 |                         | <u> </u>           |
| Part | 7:       | List Certain Payments or Tran  | sfers             |                            |                                 |                         |                    |
|      |          | ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No  Yes. Fill in the details.  |                   |                            | or services required in your ba | nkruptcy.               |                    |
|      | ¥        |  |                   |                            | -                               | _                       |                    |
|      |          |  |                   | Description and value      | of any property                 | Date payment            | Amount of          |
|      |          |  |                   | transferred                |                                 | or transfer<br>was made | payment            |
|      |          |  |                   |                            |                                 |                         |                    |
|      |          | Semrad Law Firm  |                   | Attorney's Fee - 500.00    |                                 | 5/1/2017                | <b>#</b> 500.00    |
|      |          | Person Who Was Paid  |                   |                            |                                 |                         | \$500.00           |
|      |          | 11101 S. Western Avenue  Number Street   |                   |                            |                                 |                         | \$500.00           |
|      |          | Nulliber Street  |                   |                            |                                 |                         | \$500.00           |
|      |          |  |                   |                            |                                 |                         | \$500.00           |
|      |          |  |                   |                            |                                 |                         | \$500.00           |
|      |          |  | 50643             |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6   | 60643<br>in Code  |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6   | 60643<br>ip Code  |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6<br>City State Zi  |                   |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6   |                   |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi Email or website address  | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6<br>City State Zi  | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi Email or website address  | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi Email or website address  Person Who Made the Payment, if N  Person Who Was Paid                                | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi Email or website address  Person Who Made the Payment, if N  Person Who Was Paid                                | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi Email or website address  Person Who Made the Payment, if N  Person Who Was Paid                                | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  Person Who Was Paid  Number Street                | ip Code           |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  Person Who Was Paid  Number Street  City State Zi | ot You            |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  Person Who Was Paid  Number Street                | ot You            |                            |                                 |                         | \$500.00           |
|      |          | Chicago Illinois 6 City State Zi  Email or website address  Person Who Made the Payment, if N  Person Who Was Paid  Number Street  City State Zi | ot You            |                            |                                 |                         | \$500.00           |

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| Debto |                     |  |   | Hill  | Case number (i         | f known)  |                             |
|-------|---------------------|--|---|---|------------------------|---|-----------------------------|
|       |                     | First Name   | Middle Name                                       | Last Name                                     |                        |   |                             |
|       | help                | hin 1 year before you filed<br>o you deal with your credin<br>not include any payment or | tors or to make paym                              |   | your behalf pay or tra | ansfer any property to a                                | anyone who promise          |
|       | <b>✓</b>            | No<br>Yes. Fill in the details.  |   |   |                        |   |                             |
|       |                     |  |   | Description and value o transferred           | f any property         | Date payment or transfer was made                       | Amount of paymer            |
|       |                     | Person Who Was Paid  |   |   |                        |   |                             |
|       |                     | Number Street  |   | •   |                        |   |                             |
|       |                     | City State   | Zip Code  |   |                        |   |                             |
|       |                     | City State   | Zip Code  |   |                        |   |                             |
|       | <b>the</b><br>Incli | ordinary course of your be   | usiness or financial a<br>and transfers made as s | security (such as the granting of             |                        | · · ·   |                             |
|       | <b>✓</b>            | No<br>Yes. Fill in the details.  |   |   |                        |   |                             |
|       |                     |  |   | Description and value or property transferred |                        | be any property or<br>ints received or debts p<br>hange | Date transfer wa made       |
|       |                     | Person Who Received Tran   | nsfer   | -   |                        |   |                             |
|       |                     | Number Street  |   | •   |                        |   |                             |
|       |                     | City State<br>Person's relationship to yo  | Zip Code<br>u                                     |   |                        |   |                             |
|       |                     | Person Who Received Tran   | nsfer   |   |                        |   |                             |
|       |                     | Number Street  |   |   |                        |   |                             |
|       |                     | City State<br>Person's relationship to yo  | Zip Code<br>u                                     |   |                        |   |                             |
|       | ben                 | hin 10 years before you file<br>eficiary?<br>ese are often called asset-pro              |   | d you transfer any property t                 | o a self-settled trust | or similar device of whi                                | ich you are a               |
|       | <b>✓</b>            | No<br>Yes. Fill in the details.  |   |   |                        |   |                             |
|       |                     | . 35. Fin in and dotains.  |   | Description and value                         | of the property transf | erred   | Date<br>transfer wa<br>made |
|       |                     | Name of trust  |   |   |                        |   |                             |

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Hill Debtor 1 Jerry Case number (if known) Middle Name Last Name First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Hill Debtor 1 Jerry Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb  | tor 1    |                      |                  |                    | Hill                        | Case n                    | umber (if l | known)        |                 |                    |
|------|----------|----------------------|------------------|--------------------|-----------------------------|---------------------------|-------------|---------------|-----------------|--------------------|
|      |          | First Name           |                  | Middle Name        | Last Name                   |                           |             |               |                 |                    |
| 26.  |          | e you been a part    | y in any judio   | cial or administr  | rative proceeding unde      | r any environmenta        | l law? Inc  | clude settlem | nents and orde  | ers.               |
|      | H        | Yes. Fill in the det | tails.           |                    |                             |                           |             |               |                 |                    |
|      | ш        | 100.1                | aciio:           |                    | Court or organic            |                           | Noture e    | f the case    |                 | Chatus of the      |
|      |          |                      |                  |                    | Court or agency             |                           | nature o    | i the case    |                 | Status of the case |
|      |          | Case title           |                  |                    |                             |                           |             |               |                 |                    |
|      |          | -                    |                  |                    | O1N                         |                           |             |               |                 | Pending            |
|      |          |                      |                  |                    | Court Name                  |                           |             |               |                 | On appeal          |
|      |          | Case number          |                  |                    | NumberStreet                |                           |             |               |                 | Оп арреа           |
|      |          |                      |                  |                    |                             |                           |             |               |                 | Concluded          |
|      |          |                      |                  |                    | City State                  | Zip Code                  |             |               |                 | _                  |
| Part | 11.      | Give Details Al      | out Vour F       | Rusiness or Co     | onnections to Any Bu        | ıcinace                   |             |               |                 |                    |
| rait |          | GIVE Details A       | Jour Four E      | 543i11033 01 00    | officotions to Any De       | 3311033                   |             |               |                 |                    |
| 27.  | With     | nin 4 vears before   | vou filed for    | bankruptev. die    | l you own a business or     | have any of the fol       | lowina co   | onnections to | anv business    | ?                  |
|      |          | -                    |                  |                    |                             | -                         | •           |               | •               |                    |
|      |          | A sole propri        | etor or self-e   | employed in a tra  | ade, profession, or othe    | er activity, either full- | time or p   | art-time      |                 |                    |
|      |          | A member of          | f a limited liab | oility company (L  | LC) or limited liability pa | artnership (LLP)          |             |               |                 |                    |
|      |          | A partner in a       | a partnership    | )                  |                             |                           |             |               |                 |                    |
|      |          | An officer, di       | rector, or ma    | anaging executiv   | e of a corporation          |                           |             |               |                 |                    |
|      |          | _                    |                  |                    | equity securities of a cor  | poration                  |             |               |                 |                    |
|      |          |                      |                  |                    |                             | p =                       |             |               |                 |                    |
|      | <b>✓</b> | No. None of the a    | above applie     | s. Go to Part 12   | •                           |                           |             |               |                 |                    |
|      |          | Yes. Check all that  | at apply abo     | ve and fill in the | details below for each      | business.                 |             |               |                 |                    |
|      |          |                      |                  |                    | Describe the nat            | ure of the business       |             | Employer Id   | lentification n | umber Do not       |
|      |          |                      |                  |                    |                             |                           |             | include Soc   | ial Security n  | umber or ITIN.     |
|      |          | Desires None         |                  |                    | _                           |                           |             | EIN:          |                 |                    |
|      |          | Business Name        |                  |                    |                             |                           |             |               |                 |                    |
|      |          | Number Street        |                  |                    | _                           |                           |             | Dates busin   | ness existed    |                    |
|      |          |                      |                  |                    | Name of account             | tant or bookkeeper        |             |               |                 |                    |
|      |          | City                 | State            | Zip Code           | _                           |                           |             | From          | То              |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    | Describe the nat            | ure of the business       |             |               | lentification n |                    |
|      |          |                      |                  |                    |                             |                           |             | include Soc   | ial Security n  | umber or ITIN.     |
|      |          | Business Name        |                  |                    | _                           |                           |             | EIN:          |                 |                    |
|      |          | Dusiness Name        |                  |                    |                             |                           |             |               |                 |                    |
|      |          | Number Street        |                  |                    | _                           |                           |             | Dates busin   | ness existed    |                    |
|      |          |                      |                  |                    | Name of account             | tant or bookkeeper        |             |               |                 |                    |
|      |          | City                 | State            | Zip Code           |                             |                           |             | From          | To              |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    | Describe the nat            | ure of the business       |             |               | lentification n |                    |
|      |          |                      |                  |                    |                             |                           |             | include Soc   | cial Security n | umber or ITIN.     |
|      |          | Business Name        |                  |                    | _                           |                           |             | EIN:          |                 |                    |
|      |          | Dadiiioos Naiiie     |                  |                    |                             |                           |             |               |                 |                    |
|      |          | Number Street        |                  |                    | _                           |                           |             | Dates busin   | ess existed     |                    |
|      |          |                      |                  |                    | Name of account             | tant or bookkeeper        |             |               |                 |                    |
|      |          | City                 | State            | Zip Code           |                             |                           |             | From          | To              |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |
|      |          |                      |                  |                    |                             |                           |             |               |                 |                    |

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| Deb | tor 1  | Jerry  |               |                      | Hill                         | Case number (if known)   |
|-----|--------|--|---------------|----------------------|------------------------------|--|
|     | Ī      | First Name   |               | Middle Name          | Last Name                    |  |
| 28. | cred   | iin 2 years before<br>litors, or other pa<br>No<br>Yes. Fill in the de | rties.        | bankruptcy, did yo   | u give a financial stateme   | nt to anyone about your business? Include all financial institutions,  |
|     | ш      |  |               |                      | Date issued                  |  |
|     |        |  |               |                      | Date Issueu                  |  |
|     |        | Name   |               |                      | MM/DD/YYYY                   |  |
|     |        |  |               |                      | _                            |  |
|     |        | Number Street  |               |                      |                              |  |
|     |        | -  |               |                      |                              |  |
|     |        | City   | State         | Zip Code             |                              |  |
| Par | t 12:  | Sign Below   |               |                      |                              |  |
| 1   | true a | nd correct. I undo<br>kruptcy case can                                 | erstand that  | making a false stat  | ement, concealing prope      | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|     |        |  | ure of Debtor | 1                    |                              | Signature of Debtor 2  |
|     |        | · ·  |               |                      |                              | Date   |
|     |        | Date   | 5/1/2017      |                      |                              |  |
|     | Did yo | u attach additior  | nal pages to  | Your Statement of I  | inancial Affairs for Indivi  | duals Filing for Bankruptcy (Official Form 107)?   |
|     | ✓ No   | o<br>es  |               |                      |                              |  |
|     |        |  |               |                      |                              | and a star forma   |
|     | Did yo | ou pay or agree to   | pay someo     | ne who is not an att | orney to help you fill out b | pankruptcy forms?  |
|     | ✓ N    | 0  |               |                      |                              |  |
|     | Y      | es. Name of persor   | n             |                      |                              | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

| In re  | ices<br>bllows:<br>\$4,000.00<br>\$500.00 |
|--|---|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for sen rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as for legal services, I have agreed to accept Prior to the filling of this statement I have received Balance Due  2. The source of the compensation paid to me was:    Debtor   | ices<br>bllows:<br>\$4,000.00<br>\$500.00 |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for service rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as for legal services, I have agreed to accept  Prior to the filling of this statement I have received  Balance Due  2. The source of the compensation paid to me was:  Debtor  Other (specify)  3. The source of the compensation paid to me is:  Debtor  Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  | ices<br>bllows:<br>\$4,000.00<br>\$500.00 |
| <ol> <li>Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for sen rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as for legal services, I have agreed to accept</li> <li>Prior to the filling of this statement I have received</li> <li>Balance Due</li> <li>The source of the compensation paid to me was:         <ul> <li>Other (specify)</li> </ul> </li> <li>The source of the compensation paid to me is:             <ul> <li>Other (specify)</li> </ul> </li> <li>The very not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.         <ul> <li>I have agreed to share the above-disclosed compensation with a other person or persons who are not</li> </ul> </li> </ol> | ices<br>bllows:<br>\$4,000.00<br>\$500.00 |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for sen rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as f For legal services, I have agreed to accept  Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:  Other (specify)  3. The source of the compensation paid to me is:  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not   | ices<br>bllows:<br>\$4,000.00<br>\$500.00 |
| Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:  Debtor  Other (specify)  3. The source of the compensation paid to me is:  Debtor  Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not   | \$500.00                                  |
| Balance Due  2. The source of the compensation paid to me was:    Debtor   |   |
| 2. The source of the compensation paid to me was:    Debtor  | \$3,500.00                                |
| <ul> <li>Debtor</li></ul>  |   |
| <ul> <li>3. The source of the compensation paid to me is:  Debtor  Other (specify)</li> <li>4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.</li> <li>I have agreed to share the above-disclosed compensation with a other person or persons who are not</li> </ul>   |   |
| Debtor Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not  |   |
| <ul> <li>4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.</li> <li>I have agreed to share the above-disclosed compensation with a other person or persons who are not</li> </ul>  |   |
| members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not   |   |
|  |   |
| the people sharing in the compensation, is attached.   |   |
| <ol> <li>In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:</li> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petit bankruptcy;</li> </ol>  | on in                                     |
| b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  |   |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings the   | eof;                                      |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;   |   |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:   |   |
|  |   |
| CERTIFICATION  |   |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of debtor(s) in this bankruptcy proceedings.   | the                                       |
| 5/1/2017 /s/ Jason Diaz  |   |
| Date Signature of Attorney   |   |
| Semrad Law Firm  |   |
| Name of law firm   |   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Hill, Jerry                             | Case No   |                                      |
|-----------------|---|---|--------------------------------------|
|                 | Debtor(s)                               |   |                                      |
|                 |   | Chapter.  | Chapter13                            |
|                 | VERIFIC                                 | ATION OF CREDITOR MAT                                     | RIX                                  |
| Th<br>knowledge | ne above named Debtors hereby verify e. | that the attached list of creditors is tr                 | rue and correct to the best of their |
| Date:           | 5/1/2017                                | /s/ Hill, Jerry<br>Hill, Jerry<br><i>Signature of Deb</i> | otor                                 |

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CHGO ACCEPT 6231 N Western Ave Chicago, IL, 60659

IL DEPT OF HEALTHCARE 509 S 6TH ST SPRINGFIELD, IL, 62701

5/3 BANK CC 5050 KINGSLEY DR MD# 1MOC2G CINCINATTI, OH, 45263

GM Financial ATT: Mandy Youngblood PO Box 183853 Arlington, TX, 76096

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

DEBT RECOVERY SOLUTION 900 Merchants Concourse # LL-11 Westbury, NY, 11590

MED BUSI BUR 1460 RENAISSANCE D SUITE 400 PARK RIDGE, IL, 60068

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL, 60008

Cook County Recorder of Deeds 118 N Clark Chicago, IL, 60602

City of Chicago Parking Tickets 333 South State Street, Rm 540 Chicago, IL, 60604

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IL DEPT OF HEALTHCARE c/o Porcha McKinley 509 S 6th St Springfield, IL, 62701

IDOR-Bankruptcy Section PO Box 64338 Chicago, IL, 60664

IRS 1 PO Box 7346 Philadelphia, PA, 19101

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Comcast p.o. box 196 Newark, NJ, 07101

Peoples Gas 200 E. Randolph Chicago, IL, 60601

Sprint Corp. PO Box 7949 Attn: Bankruptcy Dept. c/o Jake Rattmann Overland Park, KS, 66207

Markoff Law LLC 29 N Wacker Dr #550 Chicago, IL, 60606

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- I. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.

4

3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00  $\,$
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$77.00 for expenses, leaving a balance due of \$3,887.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s  | s)       | Attorney for Debtor(s) |  |
|-----------|----------|------------------------|--|
| XX        |          | /s/ Jason Diaz         |  |
| /s/ Jerry | , Hill   |                        |  |
| Signed:   |          |                        |  |
| Date:     | 5/1/2017 |                        |  |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Jerry<br>First Name  |   | Hill Case numbe  | t ((tknown)   |
|---|---|--|---|
|   | uestions for Reporting Purposes   |  |   |
| 16. What kind of debts do<br>you have?  | 16a. Are your debts primarily "incurred by an individual  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily money for a business or ir  No. Go to line 16c.  Yes. Go to line 17.                                      | consumer debts? Consumer debt<br>primarily for a personal, family, or  | re debts that you incurred to obtain<br>n of the business or investment.  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No.   |  | npt property is excluded and administrative asecured creditors?   |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ☑ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | n \$10,000,000,001-\$50 billion   |
| 20. How much do you estimate your liabilities to be?  Part 7: Sign Below  | S0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | Brown 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7   |
| For you   | correct.  If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7.  If no attorney represents me and out this document, I have obtained I request relief in accordance with I understand making a false state. | apter 7, I am aware that I may proce understand the relief available und I did not pay or agree to pay some ed and read the notice required by a the chapter of title 11, United Statement, concealing property, or obtains e can result in fines up to \$250,00519, and 3571. | tes Code, specified in this petition. ining money or property by fraud in 00, or imprisonment for up to 20 years, or  are of Debtor 2 |
| terkininki koto kiro anno kitoroki kiropeki kiropeki maja ko ano nyindoki biliki koto, ma a kiropeni da se  | MM / DD /   | YYYY EXECU   | ted on  |

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| Fill in this info   | mation to identify your o              | ase  |   |   |   |
|---------------------|--|--|---|---|---|
| Debtor 1            | Jerry                                  |  | Hill  |   |   |
| Debtor 2            | First Name                             | Middle Name  | Last Name   | ******  |   |
| (Spouse, if filing) | First Name                             | Middle Name  | Last Name   |   |   |
| United States E     | Bankruptcy Court for the:              | Northern   | District of Illinois  | **************************************  |   |
| Case number         | . ,                                    |  | (State)   | —   |   |
| (If known)          | ************************************** |  |   |   |   |
| Official            | Form 106De                             | eC .   |   |   | Check if this is a amended filing         |
| Declarat            | ion About an                           | Individual Deb                                       | tor's Schedules   |   | 12/1                                      |
| If two married      | people are filing togeth               | er, both are equally respo                           | nsible for supplying correct                                | information.  |   |
| money or brobe      | 1341, 1519, and 3571.                  | ile bankruptcy schedules<br>ion with a bankruptcy ca | or amended schedules, Mal<br>se can result in fines up to S | king a false statement, concealing pro<br>250,000, or imprisonment for up to 20 | perty, or obtaining<br>years, or both. 18 |
| Did you pa          | By or agree to pay some                | one who is NOT an attorr                             | ey to help you fill out bankr                               | uptcy forms?  |   |
| V No                |  |  |   |   |   |
| Yes. 1              | Name of person                         |  | Attach Bankruptcy Pe<br>Signature (Official For             | atition Preparer's Notice, Declaration, and<br>m 119).                          | ,   |
| Under nen           | alty of perium. I dealers              | a that I have read the assure                        | and a bad day of the  |   |   |
| that they           | are true and correct.                  | street Have read the SAU                             | imary and schedules filed w                                 | ith this declaration and  |   |
| /s/ Jerry i         |  | grif.  | *   |   |   |
| ognauis 0           | Deploy 1                               |  | Signature o   | if Debtor 2   |   |

Date

MM/DD/YYYY

Date 5/1/2017

MM/DD/YYYY

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| Debtor 1       |  |                             | Hill                         | Case number (itknown)  |
|----------------|--|-----------------------------|------------------------------|--|
|                | First Name   | Middle Name                 | Last Name                    |  |
| 28. Wit<br>cre | thin 2 years before you<br>editors, or other parties | filed for bankruptcy, did y | ou give a financial statem   | nent to anyone about your business? Include all financial institutions,  |
|                | No<br>Yes. Fill in the details b                     | pelow                       |                              |  |
| Lennid         |  |                             | Date issued                  |  |
|                | Name   |                             | MM/DD/YYYY                   | _  |
|                | Number Street  |                             | _                            |  |
|                | City St:   | ate Zip Code                | <del>_</del>                 |  |
| Part 12:       | Sign Below   |                             |                              |  |
| .,             | and confect. I diluciate                             | io mat making a faise sta   | Hement, concestino propi     | ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|                | 💃/s/ Jerry   |                             |                              | ×  |
|                | Signature of   | Debtor 1) /                 |                              | Signature of Debtor 2  |
|                | Date 5/1/2   | 017                         |                              | Date   |
| Did yo         | ou attach additional pa                              | ges to Your Statement of    | Financial Affairs for Indivi | iduals Filing for Bankruptcy (Official Form 107)?  |
| Settlement -   | ło   |                             |                              |  |
|                | 'es  |                             |                              |  |
| Did yo         | ou pay or agree to pay s                             | someone who is not an at    | torney to help you fill out  | bankruptcy forms?  |
| N N            | lo   |                             |                              |  |
| Surrence A     | es. Name of person                                   |                             |                              | Attach the Bankruptcy Petition Preparer's Notice.  Declaration, and Signature (Official Form 119).   |

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Hill, Jerry                            | 0   |
|-----------------|--|---|
| Debtor(s)       |  | Case No   |
|                 |  | Chapter. Chapter13  |
|                 | VERI                                   | CICATION OF CREDITOR MATRIX   |
| Ti<br>knowledge | ne above named Debtors hereby ve<br>e. | rify that the attached list of creditors is true and correct to the best of their |
| Date:           | 5/1/2017                               | /s/ Hill, Jerry   |
|                 |  | Signature of Debtor   |

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| Deb  | tor 1 Jerry                             |   |   | HIII   | Case number (if known)   |             |
|------|---|---|---|--|--|-------------|
|      | First Name                              |   | Middle Name   | Last Name  |  |             |
| 16.  |   |   |   | you. Follow these steps  | :  |             |
|      | 16a. Fill in the                        | e state in which you l  | íve.  | Illinois   |  |             |
|      | 16b. Fill in the                        | e number of people i  | ı your household.   | 1  |  |             |
|      | nouseho                                 | old   | ne for your state and separate instructions                           | To find  | a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office, | \$50,765.00 |
| 17.  |   | ines compare?   |   |  | by allo be available at the bankraptcy clerk's office.   |             |
|      | 17a. 🗹 Line                             | e 15b is less than or e<br>ler 11 U.S.C. § 1325   | qual to line 16c. On t<br>(b)(3). Go to Part 3. i                     | he top of page 1 of this<br>Do NOT fill out <i>Calculatio</i>  | form, check box 1, Disposable income is not determined on of Disposable Income (Official Form 122C-2),       |             |
|      | U.S.                                    | .U. 9 1325(0)(3), Go  | e 16c. On the top of<br>to Part 3 and fill out<br>nonthly income from | Calculation of Dispos  | ck box 2, Disposable income is determined under 11 able Income (Official Form 122C-2). On line 39 of that    |             |
| Part | *************************************** | WAS ARREST OF THE PROPERTY OF |   | · 11 U.S.C. §1325(b)   | (4)  |             |
| 18.  |   |   | income from line 1  | the first and the second of th |  | \$977.33    |
| 19.  | Deduct the modern commitment p          | narital adjustment i<br>period under 11 U.S.  | f <b>it applies.</b> If you are<br>C. § 1325(b)(4) allows             | e married, your spouse is<br>s you to deduct part of y   | not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13. |             |
|      | 19a. If the ma                          | ırital adjustment does  | not apply, fill in 0 on   | line 19a.  |  | -\$0.00     |
|      | 19b. Subtract                           | t line 19a from line  | 18.   | •  |  | \$977.33    |
| 20.  | Calculate you                           | ur current monthly i  | ncome for the year.   | Follow these steps:  |  |             |
|      | 20a. Copy line                          | e 19b.<br>by 12 (the number of  | months in a year  |  |  | \$977.33    |
|      |   |   |   |  |  | x 12        |
|      | ZUD. The resul                          | it is your current mon  | thly income for the ye  | ear for this part of the for   | m,   | \$11,727.96 |
|      | 20c. Copy the                           | median family incon   | re for your state and s   | size of household from li  | ne 16c.  | \$50,765.00 |
| 21.  |   | nes compare?  |   |  |  |             |
|      | Line 20b i                              | is less than line 20c.<br>ent period is 3 years.  | Jnless otherwise orde<br>Go to Part 4.                                | red by the court, on the   | top of page 1 of this form, check box 3, The   |             |
|      | Line 20b i<br>4, The con                | is more than or equal<br>mmitment period is 5   | to line 20c. Unless of years. Go to Part 4.                           | herwise ordered by the o   | court, on the top of page 1 of this form, check box  | .:          |
| Part | Sign Belo                               | )W  | ZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZ                                |  |  |             |
|      | By signing                              | here, I declare unde  | penalty of perjury tha  | at the information on this   | statement and in any attachments is true and correct.  |             |
|      |   | Jerry Hill 🗎 🗎  | ستبهم والمتناه المستعدية  |  |  |             |
|      |   | ture of Debtor 1  |   |  | ignature of Debtor 2   |             |
|      | Date                                    | 5/1/2017  |   | r  | Pate   |             |
|      |   | MM/DD/YYYY  |   | ~  | MM/DD/YYYY   |             |
|      | If you chec<br>If you chec<br>above.    | cked 17a, do NOT fill<br>cked 17b, fill out Forn  | out or file Form 1220<br>n 1220-2 and file it w                       | C-2.<br>ith this form. On line 39  | of that form, copy your current monthly income from line   | 14          |